FILED
May 30, 2002 8:00 am
Secretary of State

05-30-2002 91599 034 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name
SAFE INVESTMENT PROPERTIES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3440 HOLLYWOOD BLVD	3440 HOLLYWOOD BLVD
Suite, Apt. #, etc.: 360	Suite, Apt. #, etc.: 360
City & State: HOLLYWOOD, FL	City & State: HOLLYWOOD, FL
Zip: 33021 Country: USA	Zip: 33021 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number — ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ALEX D. SIRULNIK, ESQ.

Street Address (P.O. Box Number is Not Acceptable): 3440 HOLLYWOOD BLVD., STE 360

City: HOLLYWOOD FL Zip Code: 33021

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent signature required when transacting)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	SAFE, RICARDO ANGEL
STREET ADDRESS	3440 Hollywood Blvd Ste 360 Hollywood, FL 33021
CITY-ST-ZIP	
TITLE	VTD
NAME	RICARDO SAFE, ARIEL
STREET ADDRESS	3440 HOLLYWOOD BLVD, STE 360 Hollywood, FL 33021
CITY-ST-ZIP	
TITLE	
NAME	
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DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an enclosure with an address, with all other like empowered.

SIGNATURE: _____ 5/20/02 9543224280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #