

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000091342

**FILED**  
**Jun 06, 2007**  
**Secretary of State**

**Entity Name:** SAFETY SOURCE INTERNATIONAL, INC.

**Current Principal Place of Business:**

3414 W 84TH ST,  
SUITE 108  
HIALEAH, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

3414 W 84TH ST  
SUITE 108  
HIALEAH, FL 33018

**New Mailing Address:**

**FEI Number:** 65-1140048

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOSTAL, ROBERT P  
3414 W 84TH ST  
108  
HIALEAH, FL 33018 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: LOSTAL, ROBERT P  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

Title: VP ( ) Delete  
Name: LOSTAL, GRACE  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: LOSTAL, ROBERT P CEO  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

Title: VP (X) Change ( ) Addition  
Name: LOSTAL, GRACE VP  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

Title: DIR ( ) Change (X) Addition  
Name: LOSTAL, ERICA K DIR  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

Title: DIR ( ) Change (X) Addition  
Name: LOSTAL, VICTORIA L DIR  
Address: 3414 W 84TH ST, SUITE 108  
City-St-Zip: HIALEAH, FL 33018 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT P. LOSTAL

CEO

06/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date