2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000095385

1. Entity Name

TAMPA SAFE EXCHANGE, INC.



Principal Place of Business

8267 CAUSEWAY BLVD

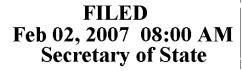
SUITE A TAMPA, FL 33619

Mailing Address

8267 CAUSEWAY BLVD

SUITE A

TAMPA, FL 33619





01232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 04-3645140

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, ALR JR 4600 W CYPRESS STREET 500

TAMPA, FL 33607

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the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE	PD					
NAME	COOPER, GARY					
STREET ADDRESS	2113 S. 86TH ST					
CITY-ST-ZIP	TAMPA, FL 33619					
TITLE	VPST					
NAME	COOPER, ZENAIDA V			U00000618908		
STREET ADDRESS	2113 S. 86TH ST			02/08/07-80049-009 158.75		
CITY-ST-ZIP	TAMPA, FL 33619					
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12. I hereby certify that the information supplied with this tiling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

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. I am familiar with, and accept