

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120943

FILED
Apr 24, 2004
Secretary of State

Entity Name: SAFETYNET FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

5100 NW 33RD AVE
SUITE 247
FT LAUDERDALE, FL 33309

New Principal Place of Business:

P.O.BOX 268750
WESTON, FL 33326

Current Mailing Address:

P.O. BOX 268750
WESTON, FL 33326

New Mailing Address:

FEI Number: 01-0577934 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIMON, JONATHA
2534 EAGLE RUN CIRCLE
WESTON, FL 33327 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIMON, JONATHA
Address: 5100 NW 33RD AVE SUITE 247
City-St-Zip: FT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SIMON, JONATHA
Address: 2534 EAGLE RUN CIRCLE
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JONATHA SIMON

PRES

04/24/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date