2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2005
Secretary of State

DOCUMENT# P02000099438

Entity Name: SAFER SERVICES, INC

Current Principal Place of Business:

403 SWALLOW DR.
#102
MIAMI SPRINGS, FL ;33166

New Principal Place of Business:

1750 N.E. 191 ST.
#427
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

403 SWALLOW DR.
#102
MIAMI SPRINGS, FL ;33166

New Mailing Address:

1750 N.E. 191 ST.
#427
NORTH MIAMI BEACH, FL ;33179

FEI Number: 42-1551839 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUICENO, SYFFER
403 SWALLOW DR.
#102
MIAMI SPRINGS, FL ;33166 US

Name and Address of New Registered Agent:

QUICENO, SYFFER
1750 N.E. 191 ST.
#427
NORTH MIAMI BEACH, FL ;33179 US

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: 08/29/2005
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: QUICENO, SYFFER
Address: 403 SWALLOW DR. #102
City-St-Zip: MIAMI SPRINGS, FL ;33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: QUICENO, SYFFER
Address: 1750 N.E. 191 ST. #427
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: SYFFER QUICENO D 08/29/2005
Electronic Signature of Signing Officer or Director — Date