

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90047 040 ***150.00

DOCUMENT # P02000125893

1. Entity Name
TRANSPORTATION SAFETY SYSTEMS INC.



Principal Place of Business

**9365 S.W. 77 AVE.
#3006
MIAMI, FL 33156 US**

Mailing Address

**9365 S.W. 77 AVE.
#3006
MIAMI, FL 33156 US**

40093311



05042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-2008827

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WUOLLET, KEVIN O
7927 S.W. 104TH ST.
E-205
MIAMI, FL 33156**

**DO NOT WRITE
IN THIS SPACE**

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 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 NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
WUOLLET, KEVIN O
7927 S. W. 104 ST. E-205
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-4-06

Date

305951-3916

Daytime Phone #

ATTACHMENT

40093911
#PO2000125893

To Whom it may concern

I had made a change of address Last year and didn't receive notice
I see my Officer address is still at the old address.

I'm paying \$150.00 for the fee for not getting my notice.

Kevin Wuollet

A handwritten signature in black ink, appearing to read 'K. Wuollet', with a stylized flourish at the end.