2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061990

Entity Name: INDUSTRIAL SAFETY SOLUTIONS, INC

FILED Jan 17, 2005 Secretary of State

Entity Name: INDUSTRIAL SAFETY SOLUTIONS, INC.						
Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
8222 CORA HUDSON, I	AL CREEK LOO FL 34667)P				
Current Mailing Address:			New Mailii	New Mailing Address:		
8222 CORA HUDSON, I	AL CREEK LOO FL 34667	OP .				
FEI Number:	55-0843486	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
RICHARDS, TIMOTHY J MR. 8639 NORTH HIMES AV. APT. 2009 TAMPA, FL 33614 US			8222 COR/	SCHELL, RONALD A MR. 8222 CORAL CREEK LOOP HUDSON, FL 34667 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.						
SIGNATUR	E: RONALD	A. SCHELL		01/17/2005		
	Electroni	c Signature of Registered Agen	t		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () SCHELL, RONAI 8222 CORAL CF HUDSON, FL 34	REEK LOOP	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	CFO () PERKINS, DONA 4985 GOLF GLE BONITA, CA 919	N RD.	Title: Name: Address: City-St-Zip:	CFO (X PERKINS, DOI 3679 TYREE S COTTONTOWN	SPRING ROAD	
Title: Name: Address: City-St-Zip:	D () POPE, JANCIE (8222 CORAL CF HUDSON, FL 34	REEK LOOP	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	V.P () NEWMAN, KURT 2565 HAVEN CR FALLBROOK, CA	EST DR.	Title: Name: Address: City-St-Zip:	V.P (X NEWMAN, KUI 229 WEST 11 NATIONAL CIT	TH. ST.	
Title: Name: Address: City-St-Zip:	RICHARDS, TIM	MES RD. APT. 2009	Title: Name: Address: City-St-Zip:	() Change ()Addition	

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: DONALD W. PERKINS CFO 01/17/2005