

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136197

FILED  
Sep 29, 2004  
Secretary of State

Entity Name: INNOVATIVE SAFETY SOLUTIONS, INC

## Current Principal Place of Business:

16316 OKEECHOBEE BLVD.  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

2981 WINDSWEPT DR  
#207  
LAKE WORTH, FL 33462 US

## Current Mailing Address:

16316 OKEECHOBEE BLVD.  
LOXAHATCHEE, FL 33470

## New Mailing Address:

2981 WINDSWEPT DR  
#207  
LAKE WORTH, FL 33462 US

FEI Number: 20-0394085

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THOMPSON, MATTHEW A  
16316 OKEECHOBEE BLVD.  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

THOMPSON, MATTHEW A  
2981 WINDSWEPT DR  
#207  
LAKE WORTH, FL 33462 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:

09/29/2004

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: P ( ) Delete  
Name: THOMPSON, MATTHEW A  
Address: 16316 OKEECHOBEE BLVD.  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: SEC (X) Delete  
Name: THOMPSON, BRANDY A  
Address: 8521 NW 29TH STREET  
City-St-Zip: SUNRISE, FL 33322

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: THOMPSON, MATTHEW A  
Address: 2981 WINDSWEPT DR #207  
City-St-Zip: LAKE WORTH, FL 33462 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MATTHEW A THOMPSON

P

09/29/2004

Electronic Signature of Signing Officer or Director

Date