

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000141150

Entity Name: BSAFE LIMITED, INC.

FILED  
Aug 03, 2006  
Secretary of State

## Current Principal Place of Business:

347 N NEW RIVER DRIVE E SUITE 1902  
FT LAUDERDALE, FL 33301

## New Principal Place of Business:

2110 NORTH OCEAN BLVD  
9E  
FT LAUDERDALE, FL 33305

## Current Mailing Address:

347 N NEW RIVER DRIVE E SUITE 1902  
FT LAUDERDALE, FL 33301

## New Mailing Address:

2110 NORTH OCEAN BLVD  
9E  
FT LAUDERDALE, FL 33305

FEI Number: 20-3654002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORTORA, MARSHA  
347 N NEW RIVER DRIVE E SUITE 1902  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

AUFSEESER, MADELINE K  
2110 NORTH OCEAN BLVD  
9E  
FT LAUDERDALE, FL 33305 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: MADELINE AUFSEESER

08/03/2006

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: TORTORA, MARSHA  
Address: 347 N NEW RIVER DRIVE E SUITE 1902  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: DANOW, JILL  
Address: 347 N NEW RIVER DRIVE E SUITE 1902  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D (X) Delete  
Name: AUFSEESER, MADELINE K  
Address: 347 N NEW RIVER DRIVE E SUITE 1902  
City-St-Zip: FT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: AUFSEESER, MADELINE K  
Address: 2110 NORTH OCEAN BLVD  
City-St-Zip: FT LAUDERDALE, FL 33305

Title: D (X) Change ( ) Addition  
Name: AUFSEESER, GEORGE  
Address: 2110 NORTH OCEAN BLVD  
City-St-Zip: FT LAUDERDALE, FL 33305

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 Chapter 119, 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: MADELINE K AUFSEESER

D

08/03/2006

Electronic Signature of Signing Officer or Director

Date