

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000003110

FILED
Jan 14, 2008
Secretary of State

Entity Name: SAFETY SUPPLIES OF FLORIDA INC

Current Principal Place of Business:

6023 NW RELIEF CT.
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

6023 NW RELIEF CT.
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 26-0612485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSALIA, NANCEY
8173 N UNIVERSITY DR
53
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

CASSALIA, NANCEY
6023 NW RELIEF COURT
PORT SAINT LUCIE, FL 34983 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:

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASSALIA, NANCEY
Address: 8173 N UNIVERSITY DR #53
City-St-Zip: TAMARAC, FL 33321

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASSALIA, NANCEY
Address: 6023 NW RELIEF COURT
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP () Change (X) Addition
Name: SMITH, JADE
Address: 7406 WOODMONT TERRACE # 206
City-St-Zip: TAMARAC, FL 33321

Title: TRES () Change (X) Addition
Name: SPITZNAGEL, ROBERT
Address: 6023 NW RELIEF COURT
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify 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: NANCEY CASSALIA

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

Date