

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000036476

FILED
Mar 05, 2009
Secretary of State

Entity Name: NATIONAL CORPORATION SAFE COUNTRY, INC

Current Principal Place of Business:

8415 N ARMENIA AV
AP 237
TAMPA, FL 33604

New Principal Place of Business:

2659 ORANGE TREE LOOP 13 J
TAMPA, FL 33618

Current Mailing Address:

8415 N ARMENIA AV
AP 237
TAMPA, FL 33604

New Mailing Address:

2659 ORANGE TREE LOOP 13 J
TAMPA, FL 33618

FEI Number: 33-1211238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALLTAX
7317 SEQUOIA DR
TAMPA, FL 33637 US

Name and Address of New Registered Agent:

J & E MULTISERVICE CENTER INC
7018 N ARMENIA AVE
TAMPA, FL 33604 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: ELKIN ARIZA

03/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ECHEVERRI, HILDA
Address: 8415 N ARMENIA AV AP 237
City-St-Zip: TAMPA, FL 33604

Title: VP () Delete
Name: MONTOYA, CARLOS
Address: 8415 N ARMENIA AV AP 237
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ECHEVERRI, HILDA
Address: 2659 ORANGE TREE LOOP 13 J
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change () Addition
Name: MONTOYA, CARLOS
Address: 2659 ORANGE TREE LOOP 13 J
City-St-Zip: TAMPA, FL 336618

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: HILDA ECHEVERRI

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date