

JAN 04 2005 1:44 PM FR HOLLAND & KNIGHT

Division of Corporations

TO 22275#888060#1#9 P.01/02

P94000001744

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : JAM MARK LIMITED
Account Number : I20000000112
Phone : (305) 789-7758
Fax Number : (305) 789-7799

REGISTERED AGENT CHANGE

SAFETY TECHNOLOGY PRODUCTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

43.75

RECEIVED

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DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1-4-05

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Safety Technology Products, Inc.
2. The principal office address: 1867 Caravan Trail, #105
Jacksonville, Florida 32216
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/30/1993 Document number: P94000001744

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Motolaw, Inc.

50 North Laura Street, Suite 2500

Jacksonville, Florida 32202

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Intrastate Registered Agent Corporation

o/o Holland & Knight LLP, 701 Brickell Avenue, Suite 300

(P.O. Box NOT acceptable)

Miami, Florida 33131

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Michael Gravette
(Signature of an officer or director)

Michael Gravette/President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

James J. Mann V.P.
(Signature of Registered Agent)

December 13, 2004
(Date)

If signing on behalf of an entity:

Intrastate Registered Agent Corporation
(Typed or Printed Name)

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*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

** TOTAL PAGE.02 **

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