Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90112 011 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000024152

1. Corporation Name

SAFE CC	ONDUCT, INC.							
Principal Place	of Business	Mailing Addre	ss			1 1881(80) 110 18111 81811 90111 60111	biin iidii Bidat lina	7 61114 1161 144
1350 SW 8TH ST BOCA RATON FL 33486 BOCA RATON FL 33486						DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualifed 03/25/1994		
2. Principal Pl	lace of Business	2a. Mailing Ad	idress			4. FEI Number	- A	pplied For
21		26				65-0576654	N N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt	. #, etc.			5. Certificate of Status Desired		Additional tequired
City & State	е	City & Sta	te	•		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip		Country	,	8. This corporation owes the current year	r Intangible	./
24	25	29	30			Personal Property Tax.	Yes	No
	9. Name and Address of Current	Registered Age	nt			10. Name and Address of New Registe	red Agent	
				81	Name			
CHERRY, HOWARD M JR 1350 SW 8TH ST				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
BOC	A RATON FL 33486			83				
٠	,			84	City		FL 85 Zip	Code
office or n	egistered agent, or both, in the State o m familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such ch ons of, Section 60	iange was authori 07.0505, Florida S	zed by tatutes	the corpora	proporation submits this statement for the purpos ation's board of directors. I hereby accept the a uired when reinstating)	E	egistered
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PVST		DELETE 1.	1 TITLE		•	Change	Addition
NAME .	CHERRY JR, HOWARD M.		1.	2 NAME				}
STREET ADDRESS	1350 S.W. 8TH ST.	. ``	1.	3 STREE	TADDRESS			1
CITY-ST-ZIP	BOCA RATON FL 33486			4 CITY-S	T-ZIP			- Baddition
TITLE			DELETE 2	1 TITLE			Change	Addition
NAME			2	2 NAME	•		* 9: 42************************************	
STREET ADDRESS	1		2	3 STREE	TADDRESS			
CITY-ST-ZIP				4 CITY-S	ST-ZIP			Addition
TITLE '		L		1 TITLE	ļ		☐ Change	[_] Addition
NAME	ļ		1	.2 NAME				
STREET ADDRESS	. ~		3	3 STREE	TADDRESS			1
CITY-ST-ZIP	·			A. CITY-S	ST-ZIP		☐ Change	Addition .
TITLE		Ĺ		# TITLE			Change	ا المقالمة ال
NAME				, 2 NAME)
STREET ADDRESS			4	3 STREE	TADDRESS			ŀ
CITY-ST-ZIP				4 CITY-S	T-ZIP			- Addition
TITLE		L		1TITLE			· Change	Addition
NAME			.	2 NAME				
STREET ADDRESS	water out		4		TADDRESS			
CITY-ST-ZIP	44411111111111111111111111111111111111			4 CITY-S	ST-ZIP			
TITLE 1-16	T 172		DELETE 6	J TITLE			Change 🗌	→ Addition)

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP