

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000068517

Entity Name: ALLSAFE MEDICAL, INC.

FILED
Feb 15, 2007
Secretary of State

Current Principal Place of Business:

2338 IMMOKALEE ROAD
#249
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

2338 IMMOKALEE ROAD
#249
NAPLES, FL 34110

New Mailing Address:

FEI Number: 59-3334733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
1395 PANTHER LANE
SUITE 300
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RETY, CRAIG
Address: 9857 CLEAR LAKE CIRCLE
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CRAIG RETY

PRES

02/15/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date