

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000082858

FILED
Apr 28, 2009
Secretary of State

Entity Name: RETRAX SAFETY SYSTEMS, INC.

Current Principal Place of Business:

1200 BRICKELL AVE
STE 1480
MIAMI, FL 33131

New Principal Place of Business:

200 SOUTH BISCAYNE BOULEVARD
SUITE 3150
MIAMI, FL 33131

Current Mailing Address:

1200 BRICKELL AVE
STE 1480
MIAMI, FL 33131

New Mailing Address:

200 SOUTH BISCAYNE BOULEVARD
SUITE 3150
MIAMI, FL 33131

FEI Number: 65-0630077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARVIN, DAVID M
1200 BRICKELL AVE STE 1480
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

GARVIN, DAVID M
200 SOUTH BISCAYNE BOULEVARD
SUITE 3150
MIAMI, FL 33131 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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GORDON, DENNIS J
Address: 6741 W SUNRISE BLVD. STE 8
City-St-Zip: PLANTATION, FL 33313

Title: T () Delete
Name: COUVERTIER, DOUGLAS
Address: 1430 MEADOWS BLVD.
City-St-Zip: FORT LAUDERDALE, FL 33327

Title: DP () Delete
Name: GARVIN, DAVID
Address: 1200 BRICKELL AVE STE 1480
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: PEPPER, DAVID
Address: PO BOX 350106
City-St-Zip: JACKSONVILLE, FL 32235

Title: D () Delete
Name: IRIBAR, MANUEL
Address: 2216 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: STAUBER, MARSHALL
Address: 4310 SHERIDAN ST
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: GARVIN, DAVID
Address: 200 SOUTH BISCAYNE BOULEVARD, SUITE 3150
City-St-Zip: MIAMI, FL 33131

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID M. GARVIN

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date