2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
04-12-2004 90331 049 ***150.00

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1. Entity Name
SAFE FOOD SYSTEMS, INC.

66417909

Principal Place of Business	Mailing Address
2780 EAST OAKLAND PARK BLVD. FT LAUDERDALE, FL 33306	2780 EAST OAKLAND PARK BLVD. FT LAUDERDALE, FL 33306

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03302004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0719781
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GUNDLACH, WILLIAM
2780 EAST OAKLAND PARK BLVD.
FT LAUDERDALE, FL 33306

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8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE William Gundlach 4.20.04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	GUNDLACH, WILLIAM III
STREET ADDRESS	2780 E. OAKLAND PARK BLVD
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	STD
NAME	GUNDLACH, JON ERIC
STREET ADDRESS	2780 E. OAKLAND PARK BLVD
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Gundlach DIRECTOR 4.20.04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

WILLIAM GUNDLACH