

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000062906 (7)

1. Corporation Name

SAFE & SECURE CREATURE COMFORTS, INC.



Principal Place of Business 2840 SW 75TH WAY, APARTMENT #2414 DAVIE FL 33314	Mailing Address 2840 SW 75TH WAY, APARTMENT #2414 DAVIE FL 33314
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2750 SW 74 Way Suite, Apt. #, etc. 22 2613 City & State 23 Davie, FL Zip 24 33314		2a. Mailing Address 26 2750 SW 74 Way Suite, Apt. #, etc. 27 2613 City & State 28 Davie, FL Zip 29 33314		3. Date Incorporated or Qualified 07/17/1997	
25 USA		30 USA		4. FEI Number 45-0769315	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

b. Name and Address of Current Registered Agent

WEESE, STEPHEN
2840 SW 75TH WAY, APARTMENT #2414
DAVIE FL 33314

10. Name and Address of New Registered Agent

81 Name Stephen Weese
82 Street Address (P.O. Box Number is Not Acceptable) 2750 SW 74 Way
83 2613
84 City Davie
85 FL 33314

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Stephen C. Weese

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

4/4/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D NAME LINK, STACY STREET ADDRESS 2840 SW 75TH WAY, APARTMENT #2414 CITY-ST-ZIP DAVIE FL 33314	<input type="checkbox"/> DELETE	1.1 TITLE D 1.2 NAME Link, Stacy 1.3 STREET ADDRESS 2750 SW 74 Way #2613 1.4 CITY-ST-ZIP Davie, FL 33314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME WEESE, STEPHEN STREET ADDRESS 2840 SW 75TH WAY, APARTMENT #2414 CITY-ST-ZIP DAVIE FL 33314	<input type="checkbox"/> DELETE	2.1 TITLE D 2.2 NAME Weese, Stephen 2.3 STREET ADDRESS 2750 S.W. 74 Way #2613 2.4 CITY-ST-ZIP Davie, FL 33314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 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.

SIGNATURE: Stephen C. Weese

4/4/98 (954) 476-0097

CR2E034 (1097)