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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000016043

1. Corporation Name

SAFETY AUTO, INC.

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90018 026 ***150.00

Principal Place	e of Business	Mailing Address			181 15818 BILLI BESTS B	// pub 1141 1001
247 GARDENIA STREET 247 GARDENIA STREET TAVERNIER FL 33070 TAVERNIER FL 33070				•		
INVENIER IE	330.0	Internation to doors		DO NOT WRITE IN TH	IS SPACE	
li.				 Date Incorporated or Qualified 02/16/1998 		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Apr	plied For
211 <i>975</i>	00 OLS HWY.	26 P.O. Bex_	/39/	65-0814790	Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
22		27			Fee Rec	
City & State	Largo, FT.	City & State Z8 Tave (Nie (, F/.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to	
Zip / 24 33 0	37 25 <i>U.S.A</i> .	^{Zip} 29 33076 30	Country U.S.A.	This corporation owes the current year Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ad Agent	
			81 Name		•	-
HADDIX, KAREN S 247 GARDENIA STREET			82 Street A	Address (P.O. Box Number is Not Acceptable)		
TAVE	ERNIER FL 33070		83			
			84 City		85 Zip C	`ode
			84 City	F	'L " 2 2 5	,040
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	orized by the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its i pointment as reg	registered jistered
SIGNATURE				equired when reinstation) OATE		
	Signature, typed or printed name of registered age	···	gistered Agent signature re	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	PS IN 12
12.	D OFFICERS AF	ID DIRECTORS	13.	P-V-T-S-D	Change	Addition
	LLOYD, GEORGE R					
NAME	131 HOOD AVENUE		1.3 STREET ADDRESS	George R Lloyd 247 Gardenia St.		
STREET ADDRESS	TAVERNIER FL 33070		1.4 CITY-ST-ZIP	Tavernier, Fl. 33070)	
CITY-ST-ZIP	IAVERNIER FE 33070		2.1 TITLE	14401741617177 33573	Change	Addition
NAME		2	2.2 NAME			
			2.3 STREET ADDRESS			
STREET ADDRESS	· •=		2.4 CITY-ST-ZIP		-	
CITY-ST-ZIP	<u> </u>	☐ DELETE	3.1 TITLE	Mai 8-8114-111-11	· Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP	,		
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			,
CITY-ST-ZIP			4.4 CITY+ST+ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			ĺ
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	-	☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS	1		6.3 STREET ADDRESS			. }
CITY-ST-ZIP		;	6.4 CITY-ST-ZIP			

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, with all other like empowered.

SIGNATURE: