


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000066825  
 1. Entity Name  
 SAFEGUARD PROPERTIES, INC.



Principal Place of Business      Mailing Address  
 ONE SE 3RD AVE      ONE SE 3RD AVE  
 STE 3050      STE 3050  
 MIAMI, FL 33131      MIAMI, FL 33131



01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0855304	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 ROSENBERG, DONALD S  
 ROSENBERG, REISMAN & STEIN LLP  
 ONE S.E. THIRD AVENUE #3050  
 MIAMI, FL 33131

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VINEBERG, STEPHEN A 1980 SHERBROOKE STREET WEST #400 MONTREAL, QUEBEC, CANADA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD STEIN, JAMES W 4141 SHERBROOKE STREET WEST, SUITE 220 WESTMOUNT, QC h3z 1b8
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEVENSON, GRANT A 4141 SHERBROOKE STREET WEST, SUITE 220 WESTMOUNT, QB h3z 1b8
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSENBERG, DONALD S ONE S.E. THIRD AVENUE #3050 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/30/06--80033-014 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an other title empowered.

SIGNATURE *Donald S Rosenberg* AS      Date 1.6.06      Daytime Phone # 3053582600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #