PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000101551 1. Corporation Name

DRIVE SAFE, INC.

Principal Place of Business

ROTTMAN, SETH

BOCA RATON FL 33433

Suite, Apt. #, etc.

City & State

Zip

Country

7040 W. PALMETTO PARK RD.,#4, STE.403

9. Name and Address of Current Registered Agent

Principal Place of Business 7040 W. PALMETTO PARK RD..#4. STE.403 BOCA RATON FL 33433

Mailing Address

2a. Mailing Address

City & State

Ζiρ

Suite, Apt. #, etc.

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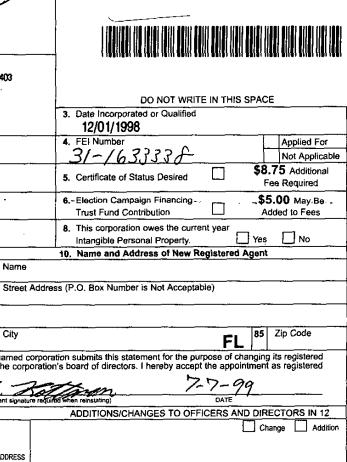
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7040 W. PALMETTO PARK RD..#4. STE.403 **BOCA RATON FL 33433**

FILED Jul 12, 1999 8:00 am Secretary of State

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			84	City	FL 85 4	ip Code
office or	t to the provisions of sections 607.0502 and 607.1508, t registered agent, or both, in the State of Florida. Such am familiar with, and accept the obligations of, section	change was aut	horized by t	armed corporation submits this s he corporation's board of director	ors. I hereby accept the appointment as	s registered s registered
IGNATURE	Seth Pottman resident Signature, typed or printed name of registered agent and title if applicable.	/ (NOTE	Registered Ade	ent signature required when reinstating)	7-7-99 DATE	
2.	OFFICERS AND DIRECTORS		13.		HANGES TO OFFICERS AND DIREC	TORS IN 12
ie .	PSD	DELETE	1.1 TITLE		Chang	ge Addition
ME	ROTTMAN, SETH		1.2 NAME			,
REET ADDRESS	7040 W. PALMETTO PARK RD.,#4, STE.403		1.3 STREET A	DDRESS		
ry-\$T-ZIP	BOCA RATON FL 33433		1.4 CITY-ST-Z	ZIP		
LE	SPTD	DELETE	2.1 TITLE		Chang	ge Addition
ME	ROTTMAN, MARTIN		2.2 NAME	Í		<i>,</i> —
REET ADDRESS	7040 W. PALMETTO PARK RD.,#4, STE.403		2.3 STREET A	DORESS		
Y-ŞT-ZIP	BOCA RATON FL 33433		2.4 CITY-ST-2	zip Ì		
LE		DELETE	3,1 TITLE		Chang	ge Addition
ME	<u>.</u>		3,2 NAME	-		
REET ADDRESS			3.3 STREET A	DDRES\$		
Y-ST-Z!P			3.4 CITY-ST-2	IP .		
LE		DELETE	4.1 TITLE		Chang	ge Addition
ΝE			4.2 NAME	}		
EET ADDRESS			4.3 STREET A	DORESS		
Y-ST-ZIP	·		4.4 CITY-ST-2	DP		
.E	. [DELETE	5.1 TITLE		Chang	ge Addition
Æ			5.2 NAME			
EET ADDRESS			5.3 STREET A	DDRESS		
r-ST-ZIP			5.4 CITY-ST-Z	IP		
.E		DELETE	6.1 TITLE		Chan	ge Addition
Æ			6.2 NAME			
EET ADDRESS			6.3 STREET A	ODRESS		
/.91.7IP			6.4 CiTY-ST-7	riP		

Country

81 Name

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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.