

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103578

Entity Name: SECURELIFE, INC.

FILED
Mar 10, 2005
Secretary of State

Current Principal Place of Business:

2617 BROOKER TRACE LANE
VALRICO, FL 335945657 US

New Principal Place of Business:

Current Mailing Address:

PMB 440
809 EAST BLOOMINGDALE AVENUE
BRANDON, FL 335118113 US

New Mailing Address:

PMB 408
1181 SOUTH SUMTER BLVD.
NORTH PORT, FL 34287 US

FEI Number: 59-3556242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALL, STEVEN K
4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FISHMAN, STEVEN P
Address: 2617 BREAKER TRACE LN
City-St-Zip: VALRICO, FL 33594

Title: ST () Delete
Name: FISHMAN, VIRGINIA
Address: 2617 BREAKER TRACE LN
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN FISHMAN

P

03/10/2005

Electronic Signature of Signing Officer or Director

Date