

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074189

FILED
Feb 09, 2006
Secretary of State

Entity Name: ONSITE SAFETY SYSTEMS, INC.

Current Principal Place of Business:

562 SOUTH ECON CIR., SUITE 1040
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

562 SOUTH ECON CIR., SUITE 1040
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3593047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AULT, JAY
1767 OAK GROVE CHASE DR.
ORLANDO, FL 32820 US

Name and Address of New Registered Agent:

LEFKOWITZ, IVAN M ESQ
430 NORTH MILLS AVENUE
ORLANDO, FL 32803 US

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: IVAN M LEFKOWITZ

02/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AULT, JAY
Address: 1106 MARTIN BLVD
City-St-Zip: WINTER PARK, FL 32792

Title: VP () Delete
Name: AULT, JOSEPH
Address: 1300 FERN FOREST RUN
City-St-Zip: OVIEDO, FL 32765

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 Chapter 119, 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: JAY AULT

D

02/09/2006

Electronic Signature of Signing Officer or Director

Date