


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # P99000079881	
1. Entity Name ALLIED SAFETY SYSTEMS, INC.	

Principal Place of Business 501 FAWN HILL PL SANFORD, FL 32771	Mailing Address 5224 W SR-46 PMB 405 SANFORD, FL 32771
--	---

DO NOT WRITE IN THIS SPACE

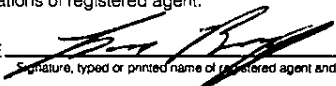


03262008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3597620	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BURNEY, LANCE 4975 FAWN RIDGE PLACE SANFORD, FL 32771
--

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  D	DATE <u>3/24/08</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURNEY, LANCE 501 FAWN HILL PL SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BURNEY, KIMBERLY 501 FAWN HILL PL SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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 all other like empowered.
--

SIGNATURE: 	DATE <u>3/24/08</u>	DAYTIME PHONE # <u>386-666-4773</u>
--	---------------------	-------------------------------------