

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000081760

1. Entity Name

SAFETY & SECURITY SUPPLIERS, INC.

**FILED**  
**Apr 10, 2000 8:00 am**  
**Secretary of State**

04-10-2000 90042 041 \*\*\*158.75

Principal Place of Business

4532 TAMiami TRAIL EAST SUITE 401  
NAPLES FL 34112

Mailing Address

4532 TAMiami TRAIL EAST SUITE 401  
NAPLES FL 34112-6709

2. Principal Place of Business

8432 INDIAN WELLS WAY  
Suite, Apt. #, etc.

3. Mailing Address

8432 INDIAN WELLS WAY  
Suite, Apt. #, etc.

City & State

NAPLES - FL

City & State

NAPLES - FL

4. FEI Number

59-3615808

Applied For

Not Applicable

Zip

34113

Country

U.S.A.

Zip

34113-3000

Country

U.S.A.

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOOLEY, JOHN F  
4532 TAMiami TRAIL EAST SUITE 401  
NAPLES FL 34112

7. Name and Address of New Registered Agent

Name FABIO N. CARDOZO  
Street Address (P.O. Box Number is Not Acceptable)  
8432 INDIAN WELLS WAY  
City NAPLES FL Zip Code 34113

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.

SIGNATURE

*Handwritten Signature* PRESIDENT.

03/22/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARDOZO, FAVIO 4532 TAMiami TRAIL EAST SUITE 401 NAPLES FL 34112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DE CARDOZO, LUCY CAJAMARCA 4532 TAMiami TRAIL EAST SUITE 401 NAPLES FL 34112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HOOLEY, JOHN F 4532 TAMiami TRAIL EAST SUITE 401 NAPLES FL 34112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FABIO N. CARDOZO 8432 INDIAN WELLS WAY NAPLES FL 34113	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT 8432 INDIAN WELLS WAY NAPLES FL 34113	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSP FABIO N. CARDOZO 8432 INDIAN WELLS WAY NAPLES FL 34113	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Handwritten Signature* PRESIDENT

03/22/00 941/774-1043

Date

Daytime Phone #

CR2E034 (9/99)