FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

| • . • | 1996 | | | y of State ORPORATIONS | | |
|---|---|--|---|---|---|---|
| DOCUN 1. Corporation | MENT # \ | /25160 | (5) | | | |
| ARCS | SAFETY SEAT, I | NC. | | | | |
| Principal Place of Business Mailir | | | Mailing Address | | | DINE GOVERNMENT REFER BETTE BEDTE BEDTE BY DES FOR F |
| 2000 PGA BLVD. SUITE 3200 PALM BEACH GARDENS FL 33408 | | | 2000 pga blvd. Suite 3200 Palm Beach Gardens fl 33408 | | | |
| | | | | | Date incorporated or Qualifie 03/30/1992 | d 3a. Date of Last Report 03/20/1995 |
| 2. Principal Pla | ace of Business | | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 1 7108 Fairway Drive | | | 6 7108 Fairway | Drive | 65-0332029 | Not Applicable |
| Suite, Apt. #, etc. 2 Ste. 200 | | | Suite, Apt. #, etc. 7 Ste. 200 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | each Gardens | E1 2 | City & State Palm Reach G | | Election Campaign Financing Trust Fund Contribution | |
| Zip | Count | | Palm Beach C | ardens, FL Country | | Added to Fees or intangible tax under s 199,032, |
| _ · | 1 | · - | ¬ ' + | 30 USA | Florida Statutes | es INO CONSOLIBATED |
| | 8-3757 25 US 9. Name and Addr | ess of Current Re | gistered Agent | | 10. Name and Address of Nev | Registered Agent UNDEA |
| .,, | | | | 81 Name | | TOP SOURCE |
| HARRIS, MICHAEL D. | | | | 82 Street | Address (P.O. Box Number is Not Accep | table) |
| 712 US HIGHWAY ONE | | | | 83 | | |
| 4TH FLOOR NO PALM BCH FL 33408 | | | | | | |
| NO I AL | III DOTT L GOTOO | | | 84 City | | FI 85 Zip Code |
| familiar with | ed agent, or both, in the high and accept the obliged speaking typed or printed name. | ations of, Section 6 | 07.0505, Florida Statutes. | by the corporation's Registered Agent signature | orporation submits this statement for the board of directors. I hereby accept the a squired when reinstating! | ppointment as registered agent. I am |
| 12. | OFFICERS AND | | FD cc. cre | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME | PC | n r | ☐ DELETE | 1. 1 TITLE | P/C/D Landow, Stuart | Change Addition |
| STREET ADDRESS | LANDOW, STUA 280 PARK AVE | | | 1.2 NAME 1.3 STREET ADDRESS | 450 Park Avenue, Ste | 2100 |
| CITY-ST-ZIP | NEW YORK NY | 3 316 240 | | 1.4 City-St-Zip | New York, NY 10022 | . 2100 |
| TITLE | \$ | | DELETE | 2 1 TITLE | S/D /V | ∑ Change |
| NAME | ROSEN, CHRIST | ER | | 2.2 NAME | Rosen, Christer | |
| STREET ADDRESS | 2000 PGA BLVD | | | 2.3 STREET ADDRESS | 7108 Fairway Drive, | Ste. 200 |
| CITY-ST-ZIP | PALM BCH GAR | Dens Fl | | 2 4 CITY - ST - ZIP | Palm Beach Gardens, | FL 33418=3757 |
| TITLE | T CAMBIELO MAN | ~ | X) DETEIE | 3. 1 THILE | T/D/V | ☐ Change 🙀 Addition |
| NAME STREET ADDRESS | SAMUELS, JAM 2000 PGA BLVD | | | 3.2 NAME | Natan, David | 0. 000 |
| CITY-ST-ZIP | PALM BCH GAR | | | 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP | 7108 Fairway Drive, | |
| TITLE | Trum DOTT ON | ~ | DELETE | 4, 1 TITLE | Palm Beach Gardens, | EL 33418=3757 ☐ Change ☐ Addition |
| NAME , | | | | 4.2 NAME | | v •_ ··· |
| STREET ADDRESS | | | | 4.3 STREET ADORESS | | • |
| CITY-S1-ZIP | | | F-1 E7. E0. | 4.4 City - St - ZIP | | |
| TITLE | | | DELETE | 5. 1 TITLE | | Change Addition |
| NAME STREET ADDRESS | | | | 5.2 NAME 5.3 STREET ADORESS | 1000015 | 3U9581 |
| CITY-ST-ZIP | | | | 5.3 STREET ADDRESS 5.4 CITY - ST, ZIP | -05/06/960 | 1075011 |
| TITLE | I | *************************************** | DELETE | 6. 1 TITLE | ***400.00 | Change Addition |
| NAME | | | | 6.2 NAME | | - 5v. |
| STREET ADDRESS | | | | 6.3 STREET ADDRESS | | < 5·\ |
| CITY-ST-ZIP | | | 1 | 6.4 CITY - ST - ZIP | | |
| 14. I do hereby certify that oath: that I | y certify that the inform the information indicat I am an officer or direct | ation supplied with/ of on this annual/e or of the corporation | Unighiling is voluntarily furnish by t or supplemental annua h or the receiver or trusted a | ned and does not guild Preport is true and ad Empowered to execut | alify for the exemption stated in Section 1 courate and that my signature shall have t te this report as required by Chapter 607. | 19.07(3)(k), Florida Statutes. I further he same legal effect as if made under Florida Statutes: and that my name |

appears in Block 12 or Block 14 if changed or of a lattach hent with an address. SIGNATURE AND TYPED OF POINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE:

David Natan (407) 775-5756

Coate Clayting Prices #