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Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V25160 (5)  
1. Corporation Name  
ARCS SAFETY SEAT, INC.



Principal Place of Business Mailing Address  
7108 FAIRWAY DR.  
SUITE 200  
PALM BEACH GARDENS FL 33418-3757  
7108 FAIRWAY DR.  
SUITE 200  
PALM BEACH GARDENS FL 33418-3757

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/30/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0332029	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HARRIS, MICHAEL D.  
712 US HIGHWAY ONE  
4TH FLOOR  
NO PALM BCH FL 33408

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1.1 TITLE	CD
NAME	LANDOW, STUART	1.2 NAME	
STREET ADDRESS	450 PARK AVE., STE 2100	1.3 STREET ADDRESS	7108 FAIRWAY DR., SUITE 200
CITY-ST-ZIP	NEW YORK NY 10022	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	SDV	2.1 TITLE	
NAME	ROSEN, CHRISTER	2.2 NAME	
STREET ADDRESS	7108 FAIRWAY DR., STE. 200	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418-3757	2.4 CITY-ST-ZIP	
TITLE	TDV	3.1 TITLE	VTS
NAME	NATAN, DAVID	3.2 NAME	
STREET ADDRESS	7108 FAIRWAY DR., STE. 200	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418-3757	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	P
NAME		4.2 NAME	WILLIAM C. WILLIS, JR.
STREET ADDRESS		4.3 STREET ADDRESS	7108 FAIRWAY DR., SUITE 200
CITY-ST-ZIP		4.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this report does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 registered trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or newly appointed with an address.

SIGNATURE

*[Signature]*

1/30/98

65-0332029

CR2E034 (10/97)