

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000078694

**Entity Name:** SAFETY-CERTIFICATION.COM, INC.

**Current Principal Place of Business:**

200 N.E. 52ND AVENUE  
OCALA, FL 34470

**Current Mailing Address:**

200 N.E. 52ND AVENUE  
OCALA, FL 34470

**FEI Number: 56-2381308**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PLAWECKI, DANIEL W  
200 N.E. 52ND AVENUE  
OCALA, FL 34470 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                      |                 |                      |
|-----------------|----------------------|-----------------|----------------------|
| Title           | PD                   | Title           | VP                   |
| Name            | PLAWECKI, DANIEL W   | Name            | PLAWECKI, NATHAN D   |
| Address         | 200 N.E. 52ND AVENUE | Address         | 200 N.E. 52ND AVENUE |
| City-State-Zip: | OCALA FL 34470       | City-State-Zip: | OCALA FL 34470       |
|                 |                      |                 |                      |
| Title           | SEC                  |                 |                      |
| Name            | PLAWECKI, MICHELE M  |                 |                      |
| Address         | 200 NE 52ND AVENUE   |                 |                      |
| City-State-Zip: | OCALA FL 34470       |                 |                      |

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHELE PLAWECKI**

**SECRETARY**

**04/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date