

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006961

**FILED**  
**Feb 12, 2012**  
**Secretary of State**

**Entity Name:** FAIL SAFE TESTING INCORPORATED

**Current Principal Place of Business:**

18 KINGS MILL ROAD  
MONROE TOWNSHIP, NJ 08831

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 655  
MANALAPAN, NJ 07726

**New Mailing Address:**

**FEI Number:** 20-4898683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRINEN, RUTH  
6700 PALERMO WAY  
LAKE WORTH, FL 33467 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CPS  
Name: NIRENBERG, GEORGE  
Address: 18 KINGS MILL ROAD  
City-St-Zip: MONROE TOWNSHIP, NJ 08831

Title: V  
Name: NIRENBERG, JEANETTE  
Address: 18 KINGS MILL ROAD  
City-St-Zip: MONROE TOWNSHIP, NJ 08831

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: GEORGE NIRENBERG

PRES

02/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date