

PROFIT CORPORATION
ANNUAL REPORT

~~1998~~ 1999



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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90295 010 ***158.75

DOCUMENT # J04490 (5)
1. Corporation Name
M. D. STANDLEY INVESTIGATIVE SERVICES, INC.

Principal Place of Business Mailing Address
5742 W. HALLANDALE BCH BV HOLLYWOOD, FL. 5742 W. HALLANDALE BCH BV HOLLYWOOD, FL.
P.O. BOX 8123 (PEMBROKE PINES, FL. P.O. BOX 8123 (PEMBROKE PINES, FL.
HOLLYWOOD FL 33023 HOLLYWOOD FL 33023

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21. State 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Country 28. Country
24. Zip 29. Zip
25. Country 30. Country

3. Date Incorporated or Qualified
03/18/1986
4. FEI Number Applied For
59-2645728 Not Applicable
5. Certificate of Status Desired X \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
STANDLEY, MICHELLE L.
5634 S.W. 114 AVENUE
COOPER CITY FL 33330

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0100 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 *Michelle L. Standley* MICHELLE L. STANDLEY REG. AGENT 4/28/98
Date (NOTE: Registered Agent signature required when reinstating)

12. DIRECTORS		13. POSITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	STANDLEY, MELVIN D.	1.2 NAME	STANDLEY, MELVIN D.
1.3 STREET ADDRESS	5634 SW 114 AVE	1.3 STREET ADDRESS	5634 S.W. 114 TH AVE.
1.4 CITY-ST-ZIP	COOPER CITY FL	1.4 CITY-ST-ZIP	COOPER CITY, FLORIDA 33330
2.1 TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT/DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME		2.2 NAME	STANDLEY, MICHELLE L.
2.3 STREET ADDRESS		2.3 STREET ADDRESS	5634 S.W. 114TH AVE.
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	COOPER CITY, FLORIDA 33330
3.1 TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 member or 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, in the agreement with an address.

SIGNATURE: *Michelle L. Standley* MICHELLE L. STANDLEY 4/28/98 954-963-0281
Date Daytime Phone # 0136210

Michelle L. Standley MICHELLE L. STANDLEY 4/29/99 954-963-0281
Date Daytime Phone #