

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002414

**FILED**  
**May 01, 2007**  
**Secretary of State**

**Entity Name:** KNOPF INVESTIGATIONS, INC.

**Current Principal Place of Business:**

984 S. FLORIDA AVENUE  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

600 FLORIDA AVENUE  
SUITE 204  
COCOA, FL 32922 US

**Current Mailing Address:**

P.O. BOX 560856  
ROCKLEDGE, FL 329560856 US

**New Mailing Address:**

**FEI Number:** 16-1646990      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BOUVIER, PAUL  
3210 N. WICKHAM ROAD  
5  
MELBOURNE, FL 32935 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Election Campaign Financing Trust Fund Contribution ( )**.

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: KNOPF, LEE  
Address: P. O. BOX 560856  
City-St-Zip: ROCKLEDGE, FL 329560856 US

Title: VTD ( ) Delete  
Name: KNOPF, ANGELA  
Address: P. O. BOX 560856  
City-St-Zip: ROCKLEDGE, FL 329560856 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEE KNOPF

PSD

05/01/2007

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

\_\_\_\_\_ Date