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Apr 04 1997 8:00am
Secretary of State



PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # P93000018035 (4)

1. Corporation Name
BACKGROUND REPORTS, INC.



Principal Place of Business: 1150 W. 68TH ST. HIALEAH FL 33014 US
Mailing Address: 1150 W. 68TH ST. HIALEAH FL 33014-5153 US

3. Date Incorporated or Qualified: 03/08/1993
3a. Date of Last Report: 01/23/1996

2. Principal Place of Business: 21 1160 W. 68 St.
22 City & State
23 Zip Country
2a. Mailing Address: 26 1160 W. 68 St.
27 City & State
28 Zip Country
29 Zip Country

4. FEI Number: 65-0396011
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
COUILLARD, AMADO A.
6831 W. 16 DR.
HIALEAH FL 33014

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 607.0502 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]* Amado A. Couillard
DATE: 4/3/97

12. OFFICERS AND DIRECTORS
1.1 TITLE: P
1.2 NAME: COUILLARD, AMADO
1.3 STREET ADDRESS: 6831 W. 16 DR.
1.4 CITY-ST-ZIP: HIALEAH FL
1.5 TITLE: ST
1.6 NAME: COUILLARD, BETTY J.
1.7 STREET ADDRESS: 6831 W. 16TH DR.
1.8 CITY-ST-ZIP: HIALEAH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
2.1 TITLE: Change Addition
2.2 NAME: Change Addition
2.3 STREET ADDRESS: 6831 W. 16 Drive
2.4 CITY-ST-ZIP: 33014
3.1 TITLE: Change Addition
3.2 NAME: Change Addition
3.3 STREET ADDRESS: Change Addition
3.4 CITY-ST-ZIP: 33014
4.1 TITLE: Change Addition
4.2 NAME: Change Addition
4.3 STREET ADDRESS: Change Addition
4.4 CITY-ST-ZIP: Change Addition
5.1 TITLE: Change Addition
5.2 NAME: Change Addition
5.3 STREET ADDRESS: Change Addition
5.4 CITY-ST-ZIP: Change Addition
6.1 TITLE: Change Addition
6.2 NAME: Change Addition
6.3 STREET ADDRESS: Change Addition
6.4 CITY-ST-ZIP: Change Addition

14. I do 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 receiver 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 or changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 4/3/97 305-827-5372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)