2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009955

FILED Jan 28, 2009 Secretary of State

Entity Name: INFORMATION RESEARCH AND INVESTIGATIVE SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business: 1110 S.W WHISPER RIDGE 1110 S.W WHISPER RIDGE TRAIL PALM CITY, FL 34990 PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 1110 S.W WHISPER RIDGE 1110 S.W WHISPER RIDGE TRAIL PALM CITY, FL 34990 PALM CITY, FL 34990 FEI Number: 65-0464359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLACK, IAN 1110 S.W. WHISPER RIDGE TRAIL PALM CITY, FL 34990 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 Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: POLLACK, IAN POLLACK, IAN

Address: 1110 S.W. HISPER RIDGE TRAIL Address: 1110 S.W. WHISPER RIDGE TRAIL

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

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: IAN H. POLLACK P 01/28/2009