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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000103789 (8) DOCUMENT #

1. Corporation Name

CANON INVESTIGATIONS, INC.

Principal Place of Business

9911 BROADVIEW TERRACE

Mailing Address

9911 BROADVIEW TERRACE

FILED Apr 24 1998 8:00am Secretary of State



BAY HARBOR ISLANDS FL 33154-1140 BAY HARBOR ISLANDS FL 33154-1140 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 29 30 Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PARKER, RICHARD 9911 BROADVIEW TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) BAY HARBOR ISLANDS FL 33154-1140 83 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15521DEVL TITLE DELETE 1 S TITLE Change ✓ Addition NAME CHARD PARKER 1.2 NAME BROADVIEWTERRACE STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 120 NW 113 AVC 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST- ZIP

14. Thereby 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 consequence of 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 c anged: ith an address.