

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 23, 1999 8:00 am  
Secretary of State

03-23-1999 90074 005 \*\*\*150.00

DOCUMENT # P97000107723

1. Corporation Name

INTELLIGENCE SERVICES CORPORATION



Principal Place of Business  
621 NW 53RD ST. SUITE 300  
BOCA RATON FL 33487

Mailing Address  
621 NW 53RD ST. SUITE 300  
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 224 Datura Street

22 Suite, Apt. #, etc.  
Suite 315

23 City & State  
West Palm Beach, FL.

24 Zip Country  
33401 25 Palm Beach

2a. Mailing Address

26 224 Datura Street

27 Suite, Apt. #, etc.  
Suite 315

28 City & State  
West Palm Beach, FL.

29 Zip Country  
33401 30 Palm Beach

3. Date Incorporated or Qualified

12/22/1997

4. FEI Number

65-0800174

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

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ARNOLD, ROBERT J  
621 NW 53RD ST, SUITE 300  
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name  
Arnold, Robert J.  
82 Street Address (P.O. Box Number is Not Acceptable)  
224 Datura Street Suite 315  
83  
84 City  
West Palm Beach FL 85 Zip Code  
33401

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HALMOS, PETER  
STREET ADDRESS 621 NW 53RD ST, SUITE 300  
CITY-ST-ZIP BOCA RATON FL 33487

TITLE D ☐ DELETE

NAME ARNOLD, ROBERT  
STREET ADDRESS 621 NW 53RD ST, SUITE 300  
CITY-ST-ZIP BOCA RATON FL 33487

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Halmos, Peter  
1.3 STREET ADDRESS 224 Datura Street Suite 315  
1.4 CITY-ST-ZIP West Palm Beach, FL. 33401

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Arnold, Robert  
2.3 STREET ADDRESS 224 Datura Street Suite 315  
2.4 CITY-ST-ZIP West Palm Beach, FL. 33401

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/8/99 561-833-6500

CR2E034 (1/1/98)

0321124