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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

INVESTIGATIVE AUDITORS, INC.

cipal Place of Business	Mailing Address
7 HIBISCUS DR	PO BOX 292886

FILED Jan 21 1998 8:00am Secretary of State



Princ SM TAMPA FL 33637 DO NOT WRITE IN THIS SPACE HS US 3. Date Incorporated or Qualified 08/22/1975 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-1747262 Not Applicable 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zìp Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SNYDER, GEORGE W. 8017 HIBISCUS DR Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33637 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITE 1.1 TITLE SNYDER, GEORGE W. NAME 1.2 NAME 8017 HIBISCUS DR STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition TITLE DELETE Change SNYDER, GEORGE W. NAME 2.2 NAME 8017 HIBISCUS DR STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 31 TITLE FARRELL, VICTORIA 32 NAME NAME 8017 HIBISCUS DR 3.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4. CITY - ST - ZIP Addition Change DELETE 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS CITY - ST - ZIP 4.4 CITY - ST - ZIP Addition DELETE Change 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP Addition DELETE Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.

SIGNATURE:

813-985-1544