

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 14 PM 9:19

DOCUMENT # F92000000851 (7)

1. Corporation Name

KROLL INFORMATION SERVICES, INC.

Principal Place of Business

200 S. BISCAYNE BLVD.
#1000
MIAMI BEACH FL 33141-2310
US

Mailing Address

200 S. BISCAYNE BLVD.
#1000
MIAMI BEACH FL 33141-2310
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/23/1992

3a. Date of Last Report
06/09/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

28

Country

29

Country

30

4. FEI Number
13-3672381

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 has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

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 type in printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C
NAME	KROLL, JULES B.
STREET ADDRESS	PARSONAGE POINT
CITY, ST, ZIP	RYE NY
TITLE	P
NAME	MCGUIRE, ROBERT J
STREET ADDRESS	1085 PACK - 14B
CITY, ST, ZIP	NEW YORK NY
TITLE	VC
NAME	ROSETTI, JOSEPH
STREET ADDRESS	39 CAVALRY RD.
CITY, ST, ZIP	WESTON CT
TITLE	VTMD
NAME	PACIOTTI, NAZZARENO E
STREET ADDRESS	14 CROSS WICKS RIDGE RD.
CITY, ST, ZIP	WILTON CT
TITLE	V6MD
NAME	GONNOLLY, ROBERT P
STREET ADDRESS	0 QUAKER HILL CT, E
CITY, ST, ZIP	CRTON ON HUDSON NY
TITLE	V
NAME	MCGILLION, ALICE T
STREET ADDRESS	50 GREENACRES AVE.
CITY, ST, ZIP	SCARSDALE NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KROLL, JULES B.
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

McPainth
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/95
(Date)

212 933 2222
Telephone Number