

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000248

FILED  
Apr 16, 2008  
Secretary of State

**Entity Name:** UNIFIED INVESTIGATIONS AND SCIENCES, INC.

## Current Principal Place of Business:

1555 OAKBROOK DRIVE  
SUITE 135  
NORCROSS, GA 30093 US

## Current Mailing Address:

1555 OAKBROOK DRIVE  
SUITE 135  
NORCROSS, GA 30093 US

## New Principal Place of Business:

3000-A SHAWNEE INDUSTRIAL WAY  
SUITE 120  
SUWANEE, GA 30024 US

## New Mailing Address:

3000-A SHAWNEE INDUSTRIAL WAY  
SUITE 120  
SUWANEE, GA 30024 US

**FEI Number:** 58-2148921

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: ROBERTS, CARTER D  
Address: 223 E. GREENBRIAR LANE  
City-St-Zip: DALLAS, TX 75203

Title: VP ( ) Delete  
Name: SMITH, EDDIE D  
Address: 1555 OAKBROOK DRIVE, STE. 135  
City-St-Zip: NORCROSS, GA 30093

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SMITH, EDDIE D  
Address: 3000-A SHAWNEE INDUSTRIAL WAY, SUITE 120  
City-St-Zip: SUWANEE, GA 30024

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: EDDIE D SMITH

VP

04/16/2008

Electronic Signature of Signing Officer or Director

Date