FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 19 1998 8:00am **PROFIT** 11 ORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H18149 (5)COASTAL INVESTIGATIVE SERVICES, INC. Principal Place of Business Mailing Address 2400 E COMMERCIAL BLVD 2400 E COMMERCIAL BLVD DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308 3. Date Incorporated or Qualified 08/24/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2442805 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STOTLER, ROBERT V. 81 Name 2400 E. COMMERCIAL BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 720** FT. LAUDERDALE FL 33308 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 agont and the diapplicable (NOTE Registered Agent signature required when rainstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. PDST DELETE Change Addition TITLE 1.1 TITLE STOTLER, ROBERT V. NAME 1.2 NAME 2400 E. COMMERCIAL BLVD. SUITE 720 STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-S1-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELFTE Change Addition TITLE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS 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 5.1 TITLE Change Addition TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE

6.1 TITLE

6.2 NAME

ROR DIRECTOR

6.3 STREET ADDRESS

SIGNATURE:

14. Thereby certify that the information indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if change(i).

NAME

STREET ADDRESS

for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information trate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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