

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90207 028 ***150.00

DOCUMENT # J98096 1. Entity Name A-1 INVESTIGATIVE AGENCY, INC.																										
Principal Place of Business 2500 HOLLYWOOD BLVD STE 309 HOLLYWOOD, FL 33020 US			Mailing Address 2500 HOLLYWOOD BLVD STE 309 HOLLYWOOD, FL 33020 US																							
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																								
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0306408 Applied For <input type="checkbox"/> Not Applicable																						
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04272008 Chg-P CR2E034 (12/06)																								
6. Name and Address of Current Registered Agent BLEIER, HENRY 2699 STIRLING RD., STE. C-307 FT. LAUDERDALE, FL 33312			7. Name and Address of New Registered Agent Name JULIE KASSOVER Street Address (P.O. Box Number is Not Acceptable) 2500 HOLLYWOOD BLVD STE 309 City Hollywood FL Zip 33020																							
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>JULIE KASSOVER</u> (NOTE: Registered Agent Signature required when constituting) DATE <u>4/28/08</u>																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																								
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>STREINER, SAMUEL</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2500 HOLLYWOOD BLVD, SUITE 309</td> <td></td> </tr> <tr> <td></td> <td>HOLLYWOOD, FL 33020</td> <td></td> </tr> </table>			TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	STREINER, SAMUEL		CITY-ST-ZIP	2500 HOLLYWOOD BLVD, SUITE 309			HOLLYWOOD, FL 33020		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other I/we empowered.			SIGNATURE: <u>[Signature]</u> Date <u>4/28/08</u> Daytime Phone #																							