FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

TED ZALICK INVESTIGATION, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # M14732

(5)

Mailing Address

FILED Jan 29 1997 8:00am Secretary of State



BIST MIRAMAR BUITE 401-0- MIRAMAR FL 3 US		6151 Miramar Parkway Suite 301-0 Miramar Fl 33023-3970 US				3. Date Incorporated or Qualified 05/01/1985	3a. Date of Last 01/30/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21 6151	MIRAMAR PARKWAY	26 6151 MIC	gama?	A2V	YAW	59-2536834	⊢	Not Applicable	
Sulte, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.		~ . ~			5. Certificate of Status Desired	ed \$8.75 Additional Fee Required		
^		Ted Zalick	FLORIDA			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
N.		Director Director	Country US.		U\$.	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
			1901			10. Name and Address of New Registered Agent			
Ted 2		81	Name						
		B2	Street Address (P.O. Box Number is Not Acceptable)						
Parkway F 6151 Mira		63							
Suite 303				84	City		85 Zi	p Code	
Miramar, FL 33023 (954) 961-4642			tatutes the s	hove	named c	orporation submits this statement for the p	FL	ito registere d	
ecent, I a	m familiar with, and accept the oblig	J1	MAC QUITHOTIZE	יול ואנ	the corpo	oration's board of directors. I hereby accep	t the appointment	as registered	
SIGNATURE	Signature, typed or printed name of registered ago	not and title if positioning	MOTE O-PI-L		4 -1 4	quired when reinstating)			
12.	OFFICERS AN	- · · · · · · · · · · · · · · · · · · ·	13.	ed Agen	t signature re	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	DRS IN 12	
TITLE	PD	DELETE		ITLE		PD	Change		
NAME				1.2 NAME 1.3 STREET ADDRESS		· ·	_		
STREET ADDRESS						ZALICK, THEODORE GIST MIRAMAR PARKWAY, SUITE 303			
CITY-ST-ZIP	MIRAMAR FL	1.4 CHY- \$1 - ZIP			MIRAMAR, FLURIDA 3	3023			
TITLE		2.1 TITLE 2.2 NAME				☐ Change	Addition		
NAME									
STREET ADDRESS				TREET A	DDRESS				
CITY-ST-ZIP		DELETE		CITY-ST	· ZIP				
TITLE						☐ Change	Addition		
NAME			3 2 N						
STREET ADDRESS					DDRESS				
CITY-ST-ZIP		DECETE		CITY - ST	- ZIP		Change	Addition	
NAME	ا ما			4. 2 NAME			Change	AGOILION	
STREET ADDRESS					DDRESS				
CITY-ST-ZIP					1			1	
MILE	DELETE			4.4 CITY - ST - ZIP 5.1 TITLE			Change	Addition	
NAME			5.2 N		-		L. Change		
STREET ADDRESS					ODRESS				
CITY-ST-ZIP				11Y-ST-					
TITLE		DELETE					Change	Addition	
NAME			62 N	AME					
STREET ADDRESS			638	1K[{ A	DDRESS				

14. I do 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. 4 2 a D. a 1/11/90