

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M89623

FILED
Mar 24, 2009
Secretary of State

Entity Name: ACCURATE INVESTIGATIONS, INC.

Current Principal Place of Business:

2419 HOLLYWOOD BLVD.
#C
HOLLYWOOD, FL 33020 US

Current Mailing Address:

2419 HOLLYWOOD BLVD.
#C
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

2419 HOLLYWOOD BLVD.
SUITE C
HOLLYWOOD, FL 33020 US

New Mailing Address:

2419 HOLLYWOOD BLVD.
SUITE C
HOLLYWOOD, FL 33020 US

FEI Number: 65-0060159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DESENA, CARMINE
2419 HOLLYWOOD BLVD.
#C
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

DESENA, CARMINE
2419 HOLLYWOOD BLVD.
SUITE C
HOLLYWOOD, FL 33020 US

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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DESENA, CARMINE,
Address: 5631 SW 1CT
City-St-Zip: PLANTATION, FL 33020

Title: T () Delete
Name: MARRIN, GORDON
Address: 11332 EDGEWATER CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: S () Delete
Name: MARRIN, GORDON
Address: 11332 EDGEWATER CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CARMINE DESENA

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date