

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000076785

FILED
Jan 17, 2009
Secretary of State

Entity Name: INVISIBLE WITNESS INVESTIGATIONS CORP.

Current Principal Place of Business:

14151 SW 26 STREET
DAVIE, FL 333255008

New Principal Place of Business:

Current Mailing Address:

14151 SW 26 STREET
DAVIE, FL 333255008

New Mailing Address:

FEI Number: 65-1225011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORAN-GOLDEN, YVONNE
14151 SW 26 STREET
DAVIE, FL 333255008 US

Name and Address of New Registered Agent:

MORAN-GOLDEN, YVONNE G
14151 SW 26 STREET
DAVIE, FL 333255008 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: YVONNE G. MORAN

01/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: SCHUPOLSKY, JAMES W
Address: 14151 SW 26 STREET
City-St-Zip: DAVIE, FL 333255008

Title: PT () Delete
Name: MORAN-GOLDEN, YVONNE
Address: 14151 SW 26 STREET
City-St-Zip: DAVIE, FL 333255008

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PT (X) Change () Addition
Name: MORAN-GOLDEN, YVONNE G DR.
Address: 14151 SW 26 STREET
City-St-Zip: DAVIE, FL 333255008

Title: D () Change (X) Addition
Name: MENZIES, KAYLA K
Address: 6011 22ND AVE. DR. E.
City-St-Zip: PALMETTO, FL 34221

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: JAMES W. SCHUPOLSKY

VPS

01/17/2009

Electronic Signature of Signing Officer or Director

Date