## 2006 FOR PROFIT CORPORATION

## Feb 21, 2006 08:00 AM **ANNUAL REPORT** Secretary of State DOCUMENT # P04000101964 1. Entity Name EXP INVESTIGATIVE, INC. Principal Place of Business Mailing Address 7945 RAMONA ST 7945 RAMONA ST MIRAMAR, FL 33023 MIRAMAR, FL 33023 02042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 80-0113306 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SINGH, RAMESH M DO NOT WRITE 7945 RAMONA ST MIRAMAR, FL 33023 IN THIS SPACE 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 eccept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (MOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PVST TITLE SINGH, RAMESH M STREET ADDRESS 7945 RAMONA ST City-St-21P MIRAMAR, FL 33023 TITLE NAME 1/00001/0442557 STREET ADDRESS 03/04/06-80025-004 155.00 CITY-ST-70 HITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS

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 charged, or on an attachment an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-SI-ZIP

> amosk C. YEESISEN)

FILED