

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017031

FILED
Jun 25, 2006
Secretary of State

Entity Name: FLORIDA BUSINESS INVESTIGATIONS, INC.

Current Principal Place of Business:

801 W SR 436 SUITE 2019
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

5257 CHAMPAGNE CIRCLE
ORLANDO, FL 32808

Current Mailing Address:

801 W SR 436 SUITE 2019
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

5257 CHAMPAGNE CIRCLE
ORLANDO, FL 32808

FEI Number: 20-2272801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, DON
801 W SR 436 SUITE 2019
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

MITCHELL, DON
5257 CHAMPAGNE CIRCLE
ORLANDO, FL 32808 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:

06/25/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MITCHELL, DON
Address: 801 W SR 436 SUITE 2019
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: MITCHELL, DON
Address: 5257 CHAMPAGNE CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: VPS () Change (X) Addition
Name: MCINTYRE, ERIC
Address: 5257 CHAMPAGNE CIRCLE
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the 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: DON S. MITCHELL

PT

06/25/2006

Electronic Signature of Signing Officer or Director

Date