

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000099151

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** SCOPE INVESTIGATIONS & CONSULTING, INC.

**Current Principal Place of Business:**

230 ROYAL PALM BEACH BLVD  
ROYAL PALM BEACH, FL 33411

**New Principal Place of Business:**

9100 BELVEDERE RD  
SUITE 109  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

49 N FEDERAL HWY  
318  
POMPANO BEACH, FL 33062

**New Mailing Address:**

**FEI Number:** 20-4290628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SUZANNE E WILLIAMS, PA  
700 SE 3RD AVE  
300C  
FORT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

WILLIAMS, MICHAEL C  
9100 BELVEDERE RD  
SUITE 109  
WEST PALM BEACH, FL 33411 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:** MICHAEL C WILLIAMS

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WILLIAMS, MICHAEL C  
**Address:** 49 N FEDERAL HWY #318  
**City-St-Zip:** POMPAN0 BEACH, FL 33062

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL C WILLIAMS

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date