

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000145970

FILED
Apr 28, 2007
Secretary of State

Entity Name: STEWART'S INVESTIGATIVE SERVICES CORP.

Current Principal Place of Business:

160 W. EVERGREEN ST.
SUITE 251
LONGWOOD, FL 32750 US

New Principal Place of Business:

160 W. EVERGREEN ST.
SUITE 160
LONGWOOD, FL 32750 US

Current Mailing Address:

160 W. EVERGREEN ST.
SUITE 251
LONGWOOD, FL 32750 US

New Mailing Address:

160 W. EVERGREEN ST.
SUITE 160
LONGWOOD, FL 32750 US

FEI Number: 68-0612680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, DEXTER L MR.
988 TURKEY HOLLOW CIRCLE
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEWART, DEXTER
Address: 988 TURKEY HOLLOW CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: S () Delete
Name: STEWART, DEXTER
Address: 988 TURKEY HOLLOW CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: T () Delete
Name: STEWART, DEXTER
Address: 988 TURKEY HOLLOW CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708 US

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: DEXTER L. STEWART

MR.

04/28/2007

Electronic Signature of Signing Officer or Director

Date