

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000006303

FILED  
May 24, 2009  
Secretary of State

Entity Name: FLORIDA INSPECTION TEAM, INC.

## Current Principal Place of Business:

5322 NW RUGBY DRIVE  
PORT SAINT LUCIE, FL 34983 US

## New Principal Place of Business:

4004 NW 88TH AVENUE  
APT 1-B  
SUNRISE, FL 33351 US

## Current Mailing Address:

5322 NW RUGBY DRIVE  
PORT SAINT LUCIE, FL 34983 US

## New Mailing Address:

4004 NW 88TH AVENUE  
APT 1-B  
SUNRISE, FL 33351 US

FEI Number: 20-8274353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, ROGER L  
5475 NW SAINT JAMES DRIVE  
SUITE 194  
PORT SAINT LUCIE, FL 34983 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

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: DSPT ( ) Delete  
Name: TRIBBLE, ROBERT  
Address: 5322 NW RUGBY DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DSPT (X) Change ( ) Addition  
Name: TRIBBLE, ROBERT W  
Address: 4004 NW 88TH AVENUE APT 1-B  
City-St-Zip: SUNRISE, FL 33351 US

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: ROBERT TRIBBLE

DSPT

05/24/2009

Electronic Signature of Signing Officer or Director

Date