

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017852

FILED
Apr 29, 2008
Secretary of State

Entity Name: FLORIDA INVESTIGATION BUREAU, INC.

Current Principal Place of Business:

5640 LAKE SHORE VILLAGE CIRCLE
LAKE WORTH, FL 33463

New Principal Place of Business:

5640 LAKE SHORE VILLAGE CIRCLE
LAKE WORTH, FL 33463

Current Mailing Address:

P.O. BOX 540608
GREENARCES, FL 33454

New Mailing Address:

2775 10TH AVE N
202
PALM SPRINGS, FL 33461

FEI Number: 14-1989257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLANCO, CARLOS M
5640 LAKE SHORE VILLAGE CIRCLE
LAKE WORTH, FL 33463 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: POLANCO, CARLOS M
Address: 5640 LAKE SHORE VILLAGE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: S () Delete
Name: POLANCO, CARLOS M
Address: 5640 LAKE SHORE VILLAGE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: T () Delete
Name: POLANCO, CARLOS M
Address: 5640 LAKE SHORE VILLAGE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

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: CARLOS POLANCO

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date