VFILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 iffchanged, or on an attachment with an address.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000013072 (3)

ACTION SUBPOENA & INVESTIGATIVE SERVICE, INC.

inclipal Place of Business Mailing Address

FILED Apr 29 1997 8:00am Secretary of State

District Olive	- (D -1	Marking Address	MANUAL Address						
Principal Place		**	Mailing Address						
1133 B.E. 3RD AVE. FT. LAUDERDALE FL 33316		1133 S.E. 3RD AVE. FT. LAUDERDALE FL 33316-1109							
						3. Date Incorporated or Qualified 12/21/1992		te of Last F 25/1996	Report
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address						pplied For
21		26	26			65-0375173 Not Applie			lot Applicable
Suite, Apt	#, etc.	Suite Apt. #, etc.			5. Certificate of Status Desired	Desired \$8.75 Additional			
22		27							lequired
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23	T. Combo	28				Trust Fund Contribution	Ш	-	
Zip	Country				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			s. 199.032,	
24	25 29 30 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
004		Trogotorou Agoin		81	Name	10.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	IGER, ROBERT 3 S.E. 3 AVE.					(2.0.0.0.1)			
	LAUDERDALE FL 33316			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
'''	DIGGETTI TO THE			83					
				84	City		FL	85 Zip	Code
44 Durayant	to the provisions of Sections CO7 OU	12 and 607 1509 Florida Statu	toe Byo ab		namod cor	poration submits this statement for the p		channing	ite registered
l office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Horida. Such change was	authorized	l hv	/ Nic corpora	tion's board of directors. I hereby accep	the app	ointment as	registered
SIGNATURE									
12,	Signature, typed or printed name of registered ag				nt signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIBECTO	RS IN 12
TITLE	PD	OFFICERS AND DIRECTORS DELETE				ABBITIONO/OHANGES TO OFFIC	C130 7 (74)	Change	
NAME	PRAGER, ROBERT		11111 12 NA						
STREET ADDRESS	5820 PALM TREE ROAD		1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33317		1.4 CITY - ST - ZIP		!				ļ
TITLE	VD DELETE 2				<u> </u>			Change	Addition
NAME				2.2 NAME					
STREET ADDRESS	5820 PALM TREE ROAD		2 3 81	REE 1	ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33317		2 4 CHY - S1 - ZIP						ļ
TITLE		☐ DELETE					*.,	Change	Addition
NAME	ł			Μŧ					l
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CITY-ST-ZIP				ly - 8	ST-ZIP				
TITLE	DELETE			4 1 3 ITLE				Change	Addition
NAME			4 2 N	4Mł					l
STREET ADDRESS			4 3 ST	HEET	ADDRESS				l
CITY-ST-ZIP				4.4 CITY - ST - 7IP					
TITLE	☐ DELETE			5 I TOLE				Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP					Y- ST- 7IP				
TITLE		DELETE	61717					Change	Addition
NAME			G.2 NA						
STREET ADDRESS			6.3 \$1	REE T	ADORESS				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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