

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
Secretary of State  
TALLAHASSEE, FLORIDA 32399-0001

APPROVED  
AND  
FILED

MAY 19 AM 10:15

DOCUMENT # P93000014798 (1)

1. Corporation Name

INTEGRA SECURITY AND INVESTIGATIONS, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1919 BLANDING BLVD.  
SUITE 4  
JACKSONVILLE FL 32210  
US

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SUITE 4  
JACKSONVILLE FL 32210  
US

DO NOT WRITE IN THIS SPACE

|                                                                         |                                                                                      |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| 3. Date of Incorporation (if 2 added)                                   | 3a. Date of Last Report                                                              |
| 02/19/1993                                                              | 03/04/1994                                                                           |
| 4. FIC Number                                                           | Applies For                                                                          |
| 59-3166477                                                              | Not Applicable                                                                       |
| 5. Capitalize of Statute Desired                                        | \$8.75 Additional Fee Required                                                       |
| 6. Election Campaign Expenses<br>Trust Fund Contribution                | \$5.00 May Be Added to Fees                                                          |
| 8. The corporation has liability for enterprise tax under Sec. 199 (NY) | Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

|                                |                         |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address     |
| 21. Suite, Apt. #, etc.        | 26. Suite, Apt. #, etc. |
| 22. City & State               | 27. City & State        |
| 23. Zip                        | 28. Zip                 |
| 24. Country                    | 29. Country             |
| 25. Country                    | 30. Country             |

9. Name and Address of Current Registered Agent

HARRIS, DAVID L  
5904 ORTEGA RIVER CIRCLE  
JACKSONVILLE FL 32244

10. Name and Address of New Registered Agent

|                                                         |
|---------------------------------------------------------|
| 81. Name                                                |
| 82. Street Address (if 2. Yes Number is Not Applicable) |
| 83. City & State                                        |
| 84. Zip                                                 |
| 85. FL                                                  |

11. I, the undersigned, the principal place of business, and the principal place of incorporation of the corporation, hereby certify that the foregoing information is true and correct, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607.

SIGNATURE

|                            |                           |
|----------------------------|---------------------------|
| 12. OFFICERS AND DIRECTORS |                           |
| NAME                       | P                         |
| Street Address             | HARRIS, DAVID L           |
| City & State               | 5904 ORTEGA RIVER CIRCLE  |
| Zip                        | JACKSONVILLE FL 32244     |
| NAME                       | V/T                       |
| Street Address             | HALE, THOMAS E            |
| City & State               | 7458 PETRELL DRIVE        |
| Zip                        | JACKSONVILLE FL 32222     |
| NAME                       | S                         |
| Street Address             | BAGSIC, REYNALDO T        |
| City & State               | 6314 IAN CHAND DRIVE WEST |
| Zip                        | JACKSONVILLE FL 32244     |

|                                                 |        |     |
|-------------------------------------------------|--------|-----|
| 13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS |        |     |
| NAME                                            | Change | Add |
| Street Address                                  |        |     |
| City & State                                    |        |     |
| Zip                                             |        |     |
| NAME                                            | Change | Add |
| Street Address                                  |        |     |
| City & State                                    |        |     |
| Zip                                             |        |     |
| NAME                                            | Change | Add |
| Street Address                                  |        |     |
| City & State                                    |        |     |
| Zip                                             |        |     |

14. I, the undersigned, certify that the information supplied with this report is true and correct, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607.

SIGNATURE: Thomas E. Hale (Vice President) Treasurer 05/09/95 (904)389-3232