FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2002 8:00 am Secretary of State P93000026396 DOCUMENT # 1. Entity Name 01-23-2002 90114 033 ***158.75 RANDALL & ASSOCIATES INVESTIGATIONS, INC. Principal Place of Business Mailing Address 7937 PANAMA STREET 7937 PANAMA STREET MIRAMAR FL 33023 MIRAMAR: FL: 33023 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0326384 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -LAW OFFICES, OF BONNE ZASCHEFLIN, ESQ. Street Address (P.O. Box Number is Not Acceptable) 9900 STIRLING ROAD STE. 200A COOPER CITY FL 33024 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible. -10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition RANDALL, LENOARD D NAME NAME 7937 PANAMA STREET STREET ADDRESS STREET ADDRESS MIRAMAR FL 33023 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition RANDALL, MARGARET NAME NAME STREET ADDRESS 7937 PANAMA STREET STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33023 CITY-ST-ZIP TITI F STD ☐ Delete TITI F ☐ Change Addition RANDALL, LANCE NAME NAME STREET ADDRESS 7937 PANAMA STREET STREET ADDRESS CITY-ST-7IF MIRAMAR FL: 33023 CITY-ST-ZIP TITLE TO THE SECOND \square Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE **的激烈性** [12] ☐ Delete TITLE Change ☐ Addition NAME NAME ::1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 report or supplemental 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 reported by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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