

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P93000049260**

1. Entity Name

RAVEN INTERNATIONAL INVESTIGATIONS, INC.**FILED****Jan 25, 2001 8:00 am**
Secretary of State

01-25-2001 90181 017 ***150.00

Principal Place of Business

Mailing Address

~~550 LE JEUNE RD~~
~~SUITE 207~~
MIAMI FL 33126
US12717 W SUNRISE BLVD
#424
FT LAUDERDALE FL 33323

2. Principal Place of Business

782 LEJEUNE Rd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 200City & State
MIAMI, FL

City & State

Zip
33126Country
U.S.A.

Zip

Country

4. FEI Number **65-0422976**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZEID, ERIC F
RAVEN INT'L INVESTIGATIONS
12717 W SUNRISE BLVD #424
FT LAUDERDALE FL 33323

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZEID, ERIC F 12717 W SUNRISE BLVD #424 FORT LAUDERDALE FL 33323	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIC F. ZEID

Date

Daytime Phone #

CR2E034 (10/00)