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PROFIT CORPORATION ANNUAL REPORT 1998 Principal Place of Business

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400009460 (4)

ESQUIRE INVESTIGATIVE CONSULTANTS INC.

Mailing Address 2298 NW BOCA RATON 7700 FAIRWAY TRAIL **BOCA RATON FL 33487**

FILED May 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33431** 3. Date Incorporated or Qualified 01/31/1994 2a. Mailing Address Applied For 65-0465779 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1 BOLENDER, JEFF A** 7700 FAIRWAY TR 62 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33487** 83 Pursuant to the provisions of Sections 607 0502 and 607, office or registered agent of toth, in the State of florida agent am familiar puts, and accord throubligate is a 08, Florids Statutes, the above-pamed corporation submits this statement for the purpose of changing its registered just change was authorized by the corporation's board of directors. I hereby accept the appointment as registered tion 60 /0505, Florida Statutes. (NOTE: Flepis OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE **PVTS** Change 1.1 TITLE BOLENDER, JEFF A. NAME 1.2 NAME STREET ADDRESS 7700 FAIRWAY TR 1.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition TITLE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CiTY-ST-2iP DELETE ☐ Change TITLE 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADORESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP 14. 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 annual report or suppremental annual chort 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 convenience of the receiver of the rece