

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Jun 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000009504 1. Corporation Name: RESULTS INVESTIGATIONS, INC.			
Principal Place of Business: 10400 Griffin Rd STE 300 COOPER CITY FL 33328		Mailing Address: 5722 Flamingo Rd STE 101 COOPER CITY 33330	
2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		25. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent Dorothy BARRASSO 5722 Flamingo Rd STE 101 COOPER CITY FL 33330			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: Dorothy BARRASSO 6-1-98 (NOTE: Registered Agent signature required when registering)			
12. OFFICERS AND DIRECTORS TITLE: Vice President NAME: DOROTHY BARRASSO STREET ADDRESS: 5722 FLAMINGO RD CITY-ST-ZIP: #101 COOPER CITY, FL 33330 TITLE: President NAME: RAY ALARCON STREET ADDRESS: 1600 W GOLFVIEW DR CITY-ST-ZIP: P. PINES 33026		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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 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 appears in Block 12 or Block 13 of this report, or on an attachment with an address. SIGNATURE: Ray H Alarcon Ray H Alarcon 954-434640			

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