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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000069276 (1) DOCUMENT

HORNET INVESTIGATIVE SERVICES, INC.

Principal Place of Business Mailing Address 103200 OVERSEAS HIGHWAY KEY LARGO FL 33007 KEY LARGO FL 33037

FILED Feb 17 1998 8:00am Secretary of State



103200 OVERSEAS HIGHWAY DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1994 2. Principal Place of Business 2. Mailing Address 4. FEI Number Applied For 65-0536905 Not Applicable 21 26 Suite, Apt #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6, Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name INGENO, JAMES 103200 OVERSEAS HIGHWAY Street Address (P.O. Box Number is Not Acceptable) #12 83 KEY LARGO FL 33037 84 City 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, typod or printed name of registered agent and title if application (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE 1.1 TITLE Change ☐ Addition TITLE INGENO, JAMES NAME 1.2 NAME 103200 OVERSEAS HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS KEY LARGO FL 33037 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE 21 TITLE Addition TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - 7IP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DILETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 51 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DEFETE 6.1 TITLE Change ☐ Addition NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 armual 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 if changed, or on an archiment with in address

SIGNATURE:

STREET ADDRESS