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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 07 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000024698 (9)

MARK INVESTIGATION AGENCY, INC. Principal Place of Business Mailing Address 9021 SW 142ND AVE 1234 SO. DIXIE HWY **SUITE 330** CORAL GABLES FL 33146 DO NOT WRITE IN THIS SPACE MIAMI FL 33186 3. Date Incorporated or Qualified 03/28/1995 2a. Mailing Address 4. FEI Number Applied For 65-0573824 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current ear Intangible 29 30 Personal Property Tax due June 30. . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ETHERIDGE, R M 3905 SEGOVIA SST. 82 Street CORAL GABLES FL 33134 63 11. Pursuant to the provisions of Sections 607 05/02 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of diagent. Lam familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. TITLE 1.1 TITLE NAME ETHERIDGE, R M 1.2 NAME 9021 SW 142ND AVE. #24 STREET ANDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - S1 - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 THLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP TITLE ☐ DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 if changed or on an attachment with an address.

SIGNATURE: