FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000029303 (1)
OPTIMUM INVESTIGATIONS AND PROTECTIVE SERVICES	

INC. Mailing Address Principal Place of Business 3075 W. OAKLAND PARK BLVD. 3075 W. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311 NEW ADDRESS 3a. Date of Last Report NEW ADDRESS 3. Date Incorporated or Qualified 04/13/1995 Applied For 4. FEI Number 2a. Mailing Address 26 | 86 | 1 2. Principal Place of Business 1-ederal H Not Applicable North 1829 FUNSTON \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Suite 22 6. Election Campaign Financing \$5.00 May Be City & State , wood, Florida Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, U.S.A 3020 Florida Statutes ☐ Yes ☐ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 1 Mc Kinnon trancois FILINGS, INC. 62 Funston St 3732 N.W. 16TH STREET 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 agent or both, in the Statute 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 any accept the profit of the provisions of Section 607.0505, Florida Statutes.

Signature

Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Such change was authorized by the corporation's board of directors. 83 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change ■ Addition DELETE. 1.1 TITLE TITLE 1.2 NAME MCKINNON, FRANCOIS R NAME 3075 W. OAKLAND PARK BLVD. 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 1.4 CITY - ST - ZIP DITY-ST-ZIP ☐ Addition ☐ Change [T] DELETE 2 1 TiTLE TITLE 2.2 NAME SANTA MARIA, OSCAR 3075 W. OAKLAND PARK BLVD. 2.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 2.4 CITY - ST-ZIP CITY - ST- ZIP Addition Change DELETE 3.1 [1](6 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHTY - \$1 - ZP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE TITLE 42 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.C:TY - S1 - 7IP CITY-ST-ZIP ☐ Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME

64 City-SI-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; that I am an officer or director of this cerporation or triffic are 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 I that god, or on an away from the control of the cerporation of the c

5.3 STREET ADDRESS

5.4 CITY - ST, - ZIF

6 1 TILE 👢 🚕

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

FRANCOIS R. McKinnon 4/2/96 927-3112

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***200.00

CR2E034 (12/95)

Addition

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