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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000066545** (1)

GABLES FINEST INVESTIGATIONS, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

FILED Jan 16 1997 8:00am Secretary of State



2355 SALZEDO STREET #301 CORAL GABLES FL 33134		2355 SALZEDO STREET #301 CORAL GABLES FL 33134-5061					
					3. Date incorporated or Qualified 08/28/1995	3a. Date of Last 04/26/1996	
2. Principal Piace of Business		2a. Ma ling Address		4. FEI Number	4. FEI Number Applied For		
Suite, Apt.	# oto	26			65-0602682		Not Applicable
City & State		Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee I	Additional Required
23		City & State	·		6. Election Campaign Financing Trust Fund Contribution	_	O May Be d to Fees
Zip 24	Country	Zip	Country	!	8. This corporation has liability for in		s. 199.032,
<u> </u>	25 g. Name and Address of Current	29 Registered Agent	30		Florida Statutes 10. Name and Address of New Reg	Yes No	····
RIFO	ELER, JAMES		81	Name	10.	JIDIO AGOIN	
	SI SOUTH DIXIE HIGHWAY						
	E 209		82	Street Add	ress (P.O. Box Number is Not Acceptab	ie)	
	MI FL 33156		63				
			84	Ciby		Taul 3	- 6- 1-
			64	City		FL 85 Zip	o Code
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statut	tes, the above	-named cor	poration submits this statement for the p	urpose of changing	its registered
agent la	rn familiar with, and accept the obligat	i Florida: Such change was a lons of, Section 607.0505, Fl	autnorized by Iorida Statute:	the corpora 3.	tion's board of directors. I hereby accep	t the appointment a	s registered
SIGNATURE							
***************************************	Signature, typed or printed name of registered agent			nl signature requ	ired when reinstating)	DATE	
12.	OFFICERS AND	DELETE DELETE	13.	·	ADDITIONS/CHANGES TO OFFIC		
NAME	CONDON, KEVIN	☐ BETEIG	1.1 TITLE			Change	Addition
	2355 SALZEDO STREET #301		1.2 NAME				
STREET ADDRESS	CORAL GABLES FL 33143		1.3 STREET				
CITY - ST - ZIP TITLE	DS	DELETE	1.4 CITY - S 2.1 TITLE	T-ZIP		Change	Addition
NAME	WELLINGHOFF, DEAN	better					Addition
STREET ADDRESS	2355 SALZEDO STREET #301		2.2 NAME	ADDDECA			
CITY-ST-ZIP	CORAL GABLES FL 33172		2.3 STREET	!			
TITLE	OUT CARLES I L. GOTTE	DELETE	2 4 CITY-S	S] ZIP		Change	Addition
NAME			3.2 NAME			L Change	L Augmen
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-5				
TITLE		☐ DELETE	4.1 TITLE	,, 5,,		Change	Addition
NAME			4. 2 NAME				/ TOURION
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-\$1-ZIP			4.4 CITY - S				
TITLE		DELETE	5.1 TifLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CHTY - ST - ZIP			5.4 CITY - S				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADORESS			
CITY - ST - ZIP			6.4 CITY-S	T- 21P			
14. I do heret	ry certify that the information supplied	with this filing does not quality	fy for the eve	mntion etate	d in Section 119.07(3)(i), Florida Statutes	. I further certify tha	it the
l am an of	ficer or director of the corporation or the	pe receiver or trustee empow	rue and accu vered to exec	rate and that ute this repo	t my signature shall have the same legal rt as required by Chapter 607, Florida St	епест as if made u atutes; and that my	nder oath; that name
appears in	i block tz or back to it changed, or c	n an attachment with an add	Dress KEV	NW.	rt as required by Chapter 607, Florida St		