


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000071580 1. Entity Name A TO Z INVESTIGATIONS & PROCESS SERVERS, INC.	
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Principal Place of Business 2636 WEST MISSION TALLAHASSEE, FL 32304	Mailing Address POST OFFICE BOX 1523 TALLAHASSEE, FL 32302
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ZAPP, SHEILA 2636 WEST MISSION TALLAHASSEE, FL 32304

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

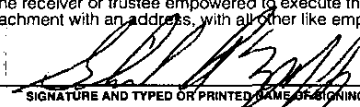
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZAPP, SHEILA 2636 MISSION ROAD TALLAHASSEE, FL 32304
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4-30-04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
04 MAY -6 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04302004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3394675	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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100036187161
05/12/04-01024-006 **300.00