


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

FILED

May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P9500073333 (1) 1. Corporation Name Crime Scenes, Inc.			
Principal Place of Business 5410 CAUSEWAY BLVD TAMPA FL 33619 US		Mailing Address P.O. BOX 291458 TAMPA FL 33687	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 P.O. Box 2818 27 Suite, Apt. #, etc. 28 Brandon FL 29 33509 30 Country	
9. Name and Address of Current Registered Agent POWELL, DAVID G. 3819 E. 7TH AVE TAMPA FL 33605		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 15625 Gulf Blvd. 84 City Redington Beach FL 85 Zip Code 33708	
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 <u>David Powell</u> DAVID POWELL 4/29/98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE P NAME POWELL, DAVID G. STREET ADDRESS 6010 D PINE TREE LN CITY-ST-ZIP TAMPA FL 33617 [] DELETE TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 15625 Gulf Blvd. 1.4 CITY-ST-ZIP Redington Beach, FL 33708 [] Change [] Addition 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP [] Change [] Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP [] Change [] Addition 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP [] Change [] Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP [] Change [] Addition 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/29/1995

4. FEI Number
59-3451929

Applied For
[] Not Applicable

5. Certificate of Status Desired [] \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution [] \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [X] Yes [] No

14. 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 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: DAVID POWELL 4/29/98 813-123-7725