

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90477 042 ***150.00

DOCUMENT # P96000016639 1. Entity Name LYON INVESTIGATIONS, INC.					
Principal Place of Business 1307 BELMONT PLACE BOYNTON BEACH, FL 33436 US			Mailing Address 1307 BELMONT PLACE BOYNTON BEACH, FL 33436 US		
2. Principal Place of Business - No P.O. Box # 7848 SONOMA SPRINGS CIRCLE Suite, Apt. #, etc. # 204		3. Mailing Address Suite, Apt. #, etc. 			
City & State LAKE WORTH FL		City & State 		4. FEI Number 65-0649317	
Zip 33463		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent METZGER, RICHARD L 1307 BELMONT PLACE BOYNTON BEACH, FL 33436				7. Name and Address of New Registered Agent Name 	
Street Address (P.O. Box Number is Not Acceptable) 				City FL	
Zip Code 				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 <u><i>Richard L. Metzger P</i></u> 4/24/07 <small>Signature of registered agent or person authorized to act on behalf of the corporation (NOTE: Registered Agent signature required when registering)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P METZGER, RICHARD L 1307 BELMONT PLACE BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P METZGER, RICHARD L 7848 SONOMA SPRINGS CIRCLE 204 LAKE WORTH FL 33463	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Richard L. Metzger P</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/24/07 861-577-0022 <small>Date Daytime Phone #</small>		

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