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 # P96000080724 (3)

COLONIAL INVESTIGATIONS AND SECURITY CONSULTANTS, INC.

Principal Place of Business

1536 N.W. 8TH AVENUE POST OFFICE BOX 1527
HOMESTEAD Ft 33030 HOMESTEAD Ft 33090

2. Principal Place of Business

2a. Mailing Address

FILED Mar 03 1997 8:00am Secretary of State



2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 2. Fell Number 6. Fell Number 6. Certificate of Status Desired City & State City & State City & State 2. Country Country Country Country Country Applied For Not Applied For Applied For Applied For Applied For Applied For Applied F						3. Date Incorporated or Qualified 3a. Date of Last Report 09/26/1996				
Suit Apr.	2. Principal	2a, Mailing Address					L	TA:	polied For	
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Cry & State State Fee Required		it #. etc								
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Zop Country Zop Country Zop Country String Exception has lability for intengible tax under s. 199.032	City & St	ate	City & State				6. Election Campaign Financing		\$5.00	May Be
26	23				 		Trust Fund Contribution		Added	o Fees
PRACHER, DOUGLAS JESO. 317 NORTH KROME AVENUE HOMESTEAD FL 33030 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zap Code 11. Pursuant to the provisions of Sections 607 0002 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 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 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 office or registered agent, and in the state of the purpose of changing its registered office or registered agent, and in the state of the purpose of changing its registered office or registered agent, and in the appointment as registered office or registered agent, and in the appointment as registered agent, and in the appointment as registered agent, and an appoint registered agent, and an appoint registered agent, and appointment as registered office or registered agent, and appointment as registered after a purpose of changing its registered office or registered agent, and appointment as registered after a purpose of changing its registered after a purpose of changing its registered after a purpose authorized by the corporations board of directors. I hereby accept the appointment as registered after a purpose and registered additions. Interest and a purpose and registered additions. Interest add		Country	25 29 30		<u> </u>					199.032,
PRACHER, DOUGLAS J ESO. 317 NORTH KROME AVENUE HOMESTEAD FL 33030 82 Street Address (P.O. Box Number is Not Acceptable) 83	24									
THE CARRY SPEELER, KATHLEEN K STRET ADDRESS ONLY ST		g. Name and Address of Curre	nt Registered Agent		_ _		10. Name and Address of New Reg	istered Aç	ent]
317 NORTH KROME AVENUE HOMESTEAD FL 33030 11. Pursuant to the provisions of Sections 607 6572 and 607 1598, Ferrial Statutes, the above named corporation submits this statement for the purpose of changing its registered of corporation in the provisions of Sections 607 6502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered of corporation in the provisions of Sections 607 6502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered of corporations beard of directors. Thereby accept the appointment as registered directors in the purpose of changing its registered directors. The purpose of changing its registered directors in the purpose of changing its registered directors. Thereby accept the appointment as registered directors. Thereby accep	PR	RACHER, DOUGLAS J ESQ.			81 Na	ame				
HOMESTEAD FL 33030 88	317 NORTH KROME AVENUE					eet Addre	ss (P.O. Box Number is Not Acceptable			
STREET ADDRESS CITY ST /PP						en onest Address (r. o. box Hormat is Not Acceptable)				
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11. Pressure to the provisions of Sections 607 0502 and 607 1508. Florida Statutes. The above named corporation submits this statement for the purposes of changing its registered address registered address or repaired upon to whith in this State of Ebroras. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent and secretary that are decays the obligations of Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. WHEELER, JOSEPH H 1536 N.W. STANKEN STREET ADDRESS 157 ST. 2P HOMESTEAD FL 33030 1011 DUMFELLER, ADDRESS TO OFFICERS AND DIRECTORS IN 12. WHEELER, JOSEPH H 1538 N.W. STANKEN ST					B4 Ci	ty		FI	85 Zip i	Code
SIGNATURE	44 Purcuar	at to the provisions of Sections 607.05	02 and 607 1508 Florida St	atutes the st	ove-na	med corno	vation submits this statement for the or		hanaina it	s registered
12	office o agent. I	r registered agent, or both, in the State am familiar with, and accopt the oblig	e of Florida, Such change w gations of, Section 607.0505	as authorized , Florida Stat	d by the utes.	corporatio	on's board of directors. I hereby accept	the appoi	ntment as	registered
12	SIGNATURE	r								,
THE	OICH VIOL	Signature, typed or printed name of registered as	jent and tide if applicable	(NOTE: Registered	Agent sig	nature required	d when reinstating)	DATE		
NAME STREET ADDRESS 1536 N.W. 8TH AVENUE 12 NAME 13 STREET ADDRESS 1536 N.W. 8TH AVENUE 13 STREET ADDRESS 16 O.W. 8 AVENUE 16 36 N.W. 8 AVENUE 17 36 N.W. 8	12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE			
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			4				E Parker 440 07/095 Florida Or 1	+ 6	mate at	45.0

4. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Forda Statutes. 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

SIGNATURE AND TYPED OR PRINTED NAME O

Joseph Whe

2/19/97

246-8720