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 # P96000088886 (2)

INTERNET ASSISTED INTERNATIONAL INVESTIGATION, I NC.

Principal Place of Business									
3717 SOUTH DIXIE HIGHWAY.	SUITE 1								

Mailing Address

3717 SOUTH DIXIE HIGHWAY, SUITE 1

FILED Mar 11 1997 8:00am Secretary of State



WEST PALM	BEACH FL 33405	WEST PALM	BEACH FL 334	405-2229							
						3. Date Incorporated or Qualified 10/29/1996	3a. Date of Last Report				
2. Principal	Place of Business	2a. Mailing /	Address				4. FEI Number		ŤL		lied For
21		26	***				65-0702777				Applicable
Suite, Ap	ot #, etc	Suite, Ar	ot. #, etc.				5. Certificate of Status Desired			75 Ac e Req	kditionat ul re d
City & St. 23	ale	City & St	ate				6. Election Campaign Financing Trust Fund Contribution			.00 N ded to	lay Be Fees
7ф 24]	Country 25	y Zip		Count 30	ry		8. This corporation has liability for in Florida Statutes		tax und	iers. 1	99.032,
		ss of Current Registered Age					10. Name and Address of New Reg	platered A	gent		
Ah	MERILAWYER CHARTE	RED		8	1	Name					
. 34	13 ALMERIA AVENUE			ā	2	Street Ac	dress (P.O. Box Number is Not Acceptab	le)			
CO	Oral Gables Fl 3313	34		L	\perp						
				8	3						
				8	4	City		FL	85	Zip Co	xde
office or	r registered agent, or both	tions 607.0502 and 607.1508, I n, in the State of Florida. Such o ept the obligations of, Section	change was at	uthorized I	bv.	the corpo	orporation submits this statement for the praction's board of directors. I hereby accep	urpose of t the appo	changi ointmer	ng its nt as re	registered egistered
SIGNATURE	Signature typical or printed hamil	e of registered agent and little if applicable	(NOTE	Registered A	gen	nt signature re	quired when reinstating)	DATE			
12.		FFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	TORS	IN 12
TITLE	PSTD		DELETE	1.1 TITLE	E				Cha	nge	Addition
NAME	PIETSCH, KENT L			1.2 NAM	E						
STREET ADORESS		HIGHWAY, SUITE 1		1.3 STRE	ET /	AL)DRESS					
CITY-ST-ZIF	WEST PALM BEAC		I DELETE	1.4 CITY		- ZIP			Cha		Addition
TITLE	DOUGLAS, PAUL N	·-	DELETE	2.1 TITLE					Cha	nge	AUGINION
NAME STREET ADORES:		HIGHWAY, SUITE 1		22 NAM		ADDRESS					
CITY - ST - ZIP	WEST PALM BEAC			2.3 SIND							
TITLE			DELETE	31 TITU		1-24			Cha	nge	Addition
NAME				3.2 NAM	E						
STREET ADORES	s			3 3 STRE	ET /	ADDRESS					
CHTY-ST-ZIP				3.4. CITY	/- \$1	T-ZIP					
1:TLF			DELETE	4.1 TITLE	E				Cha	nge	Addition
NAME				4. 2 NAM	Æ						
STREET ADDRESS	s					ADDRESS					
CHY-SI-2IP			DELETE	4.4 CITY	-	- ZIP			Cha	noo	Addition
THEF		L	☐ NETE (E	5.1 TITUE						nge	Addition
NAME exercit appeared				5.2 NAM		ADDRESS					
STREET ADDRESS	9			5.4 CITY							
DITY-ST-ZIP TITLE	A	<u>-</u>	DELETE	6.1 TITU		- <u>4</u> 17			Cha	nge	Addition
NAME			- 	6.2 NAM		}				-	
STREET ADDRESS	s					ADDRESS					
C(1Y+S1+ZIP				6.4 CITY							

14. I do 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 ordrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing it on an attach lient with an address.

SIGNATURE:

561 655 7861