

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027665

FILED
May 01, 2005
Secretary of State

Entity Name: PROBE INVESTIGATIONS, INC.

Current Principal Place of Business:

133 GROVEWOOD AVE.
SANFORD, FL 32773

New Principal Place of Business:

225 PACER STREET NW
LAKE PLACID, FL 33852

Current Mailing Address:

133 GROVEWOOD AVE.
SANFORD, FL 32773

New Mailing Address:

225 PACER STREET NW
LAKE PLACID, FL 33852

FEI Number: 59-3478792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANNAN, STEPHEN
133 GROVEWOOD AVE.
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

HANNAN, STEPHEN
225 PACER STREET NW
LAKE PLACID, FL 33852 US

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.

SIGNATURE: STEPHEN HANNAN

05/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HANNAN, STEPHEN
Address: 133 GROVEWOOD AVE.
City-St-Zip: SANFORD, FL 32773

Title: V () Delete
Name: HANNAN, SANDRA
Address: 133 GROVEWOOD AVE.
City-St-Zip: SANFORD, FL 32773

Title: M () Delete
Name: HANNAN, DONALD
Address: 133 GROVEWOOD AVE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HANNAN, STEPHEN
Address: 225 PACER STREET NW
City-St-Zip: LAKE PLACID, FL 33852

Title: V (X) Change () Addition
Name: HANNAN, SANDRA
Address: 225 PACER STREET NW
City-St-Zip: LAKE PLACID, FL 33852

Title: M (X) Change () Addition
Name: HANNAN, DONALD
Address: 225 PACER STREET NW
City-St-Zip: LAKE PLACID, FL 33852

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN HANNAN

DP

05/01/2005

Electronic Signature of Signing Officer or Director

Date