2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028781

Entity Name: INTRACOASTAL DETECTIVE AGENCY INC.

Apr 22, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1550 NE 40 ST

10550 SR 84 OAKLAND PARK, FL 33334 US #332

DAVIE, FL 33324 US

Current Mailing Address: New Mailing Address:

1511 E. COMMERCIAL BLVD

FT LAUDERDALE, FL 33334 US

FEI Number: 65-0746434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAILEY, VALERIE 1550 NE 40 ST

OAKLAND PARK, FL 33334

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BAILEY, VALERIE BAILEY, VALERIE Name: Name: 1550 N.E. 40TH ST 10550 SR 84, # 332 Address: Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: **DAVIE, FL 33324**

Title: sv Title: sv () Delete (X) Change () Addition

Name: BAILEY, VALERIE Name: BAILEY, VALERIE 1550 NE 40TH ST 10550 SR 84, #332 Address: Address: OAKLAND PARK, FL 33334 DAVIE, FL 33324 US City-St-Zip: City-St-Zip:

() Delete Title: Title: D (X) Change () Addition

BAILEY, JARROD Name: BAILEY, JARROD Name: 1550 NE 40 ST 10550 SR 84, #332 Address: Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: DAVIE, FL 33324 US

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: VALERIE BAILEY MS 04/22/2004