

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90194 045 ***158.75

DOCUMENT # P97000042670

1. Corporation Name

AMBASSADOR INVESTIGATION AND SECURITY, INC.

Principal Place of Business

RT 5 BOX 94A
QUINCY FL 32351

Mailing Address

RT 5 BOX 94A
QUINCY FL 32351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1997

4. FEI Number

59-3457338

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 114 N. MADISON ST.

Suite, Apt. #, etc.

22

City & State

23 QUINCY, FL

Zip

24 32351

Country

25 U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

BANKS, ROSEMARY C
RT 5 BOX 94A
QUINCY FL 32351

10. Name and Address of New Registered Agent

81 Name

Dennis Banks

82 Street Address (P.O. Box Number is Not Acceptable)

RT 5 BOX 94A

83

84 City

Quincy

FL

85 Zip Code

32351

11. Pursuant to the provisions of Sections 607.0502 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Rosemary C. Banks

(NOTE: Registered Agent signature required when reinstating)

DATE

04-19-99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME BANKS, DENNIS
STREET ADDRESS RT 5 BOX 94A
CITY-ST-ZIP QUINCY FL 32351

TITLE D ☐ DELETE

NAME BANKS, ROSEMARY C
STREET ADDRESS RT 5 BOX 94A
CITY-ST-ZIP QUINCY FL 32351

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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, with all other like empowered.

SIGNATURE:

Rosemary C. Banks ROSEMARY C. BANKS

04-19-99

(850) 627-3119

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0056169

CR2E034 (11/98)