2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

FILED
Jan 09, 2006 08:00 AM
Secretary of State

1. Entity Name	MENT # P970000813 Estigations, Inc.	29			Secr	etary of State
Principal Place 4696 BRAYTO PALM HARBO		Mailing Address 4696 BRAYTON TERR N PALM HARBOR, FL 34685	US		s častic sklada Barios Bakad Barios	. Ben'ny vondy higher hije hihip jehebi 17 idai
; 				01032006	No Chg-P	CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE				4. FEI Numbe		Applied For
				59-347 5. Certificate	434Z of Status Desired	Not Applicable \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				<u> </u>	·	ree required
BALESTIERE, DANIEL 4696 BRAYTON TERR N PALM HARBOR, FL 34685			DO NOT WRITE IN THIS SPACE			
 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. I am familiar with, and accept the obligations of registered agent. 						
Signature, typed or printed name of registered agent and title if applicable. [NOTE, Registered Agent eignature required when reintesting) DATE						
FILE NOWII! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ded to Fees	01/11/06-	-80001-005 150.00
10.	OFFICERS AND DI	RECTORS	1			
NAME STREET ADDRESS CITY-ST-ZIP	BALESTRIERE, DANIEL 4696 BRAYTON TERR N PALM HARBOR, FL 34685	<u> </u>				
TITLE NAME						
STREET ADDRESS CITY - ST - ZIP			1			
TITLE NAME						
STREET ADDRESS '				DO	NOT W	RITE
TITLE NAME		 	1	IN .	THIS SF	ACE
STREET ADDRESS CITY-ST-ZIP						
TITLE	-	<u></u>	1		-	
NAME STREET ADDRESS						
CITY-ST-ZIP TITLE			1			
NAME STREET ADDRESS			1			
12. i hereby	certify that the information supplied with the	is filing does not qualify for the ex	temptions containe	nd in Chapter 119	9, Florida Statutes. I	further certify that the information
12. I hereby centify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a statutess, with all other like empowered.						