

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90191 004 ***150.00

DOCUMENT # **P97000097192**

1. Entity Name
ARROW INVESTIGATIVE SERVICES, INC.



Principal Place of Business
**11380 NW 18TH MANOR
CORAL SPRINGS FL 33071
US**

Mailing Address
**11380 NW 18TH MANOR
CORAL SPRINGS FL 33071
US**

2. Principal Place of Business
11380 NW 18th ManOr
Suite, Apt. #, etc.

3. Mailing Address
11380 NW 18th ManOr
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Coral Springs FL

City & State
Coral Springs FL

4. FEI Number **65-0795648**

☒ Applied For
☐ Not Applicable

Zip **33071** Country **US**

Zip **33071** Country **US**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MORGAN, KENNETH A
11380 NW 18TH MANOR
CORAL GABLES FL 33071**

7. Name and Address of New Registered Agent

Name **Morgan, Kenneth A.**
Street Address (P.O. Box Number is Not Acceptable)
11380 NW 18th ManOr
City **Coral Springs** FL Zip Code **33071**

8. 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 **Kenneth A. Morgan**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **01/06/03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PVD	<input type="checkbox"/> Delete
NAME	MORGAN, KENNETH A	
STREET ADDRESS	11380 NW 18TH MANOR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MORGAN, KENNETH A	
STREET ADDRESS	771 SW 120 WAY	
CITY-ST-ZIP	DAVIE FL 33325	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MORGAN, KENNETH A	
STREET ADDRESS	771 SW 120 WAY	
CITY-ST-ZIP	DAVIE FL 33325	
TITLE	ST	<input type="checkbox"/> Delete
NAME	MORGAN, SHANE	
STREET ADDRESS	11380 NW 18TH MANOR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, KENNETH A	
STREET ADDRESS	11380 NW 18th MANOR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, KENNETH A	
STREET ADDRESS	11380 NW 18th MANOR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, SHANE	
STREET ADDRESS	11380 NW 18th MANOR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, SHANE	
STREET ADDRESS	11380 NW 18th MANOR	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Kenneth A. Morgan**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **01/06/03** (954) 553-0206
Daytime Phone #

CR2E034 (10/02)