

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90158 029 ***150.00

DOCUMENT # P99000001297

1. Entity Name

LUMINOL INVESTIGATIONS INC.

Principal Place of Business

Mailing Address

2500 E. HALENDALE BEACH BLVD.
HALENDALE FL 33009

2500 E. HALENDALE BEACH BLVD.
HALENDALE FL 33009

2. Principal Place of Business

3. Mailing Address

2500 E HALENDALE BEACH BLVD

← SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

705

Suite 705

City & State

City & State

HALENDALE, FL

HALENDALE, FL

Zip

Country

Zip

Country

33009

USA

4. FEI Number

65-0909942

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUCOTE, WAYNE
3101 LEE STREET
HOLLYWOOD FL 33021

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President** ☒ Delete
NAME **STEVE DOHRAN**
STREET ADDRESS **5940 SW. 14TH ST**
CITY-ST-ZIP **PLANTATION, FL 33317**

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **WAYNE DUCOTE**
STREET ADDRESS **3101 LEE ST.**
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
NAME **ELLA DRAGIE**
STREET ADDRESS **3101 LEE ST**
CITY-ST-ZIP **HOLLYWOOD FL. 33021**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne C. Ducote
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00 854-455-9767
Date Daytime Phone #

CR2E034 (9/99)