

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000034079

FILED
Apr 17, 2006
Secretary of State

Entity Name: ALTIMA INVESTIGATIONS, INC.

Current Principal Place of Business:

12921 KEY LINE BLVD.
WEST PALM BEACH, FL 33412 US

New Principal Place of Business:

Current Mailing Address:

12921 KEY LINE BLVD.
WEST PALM BEACH, FL 33412 US

New Mailing Address:

FEI Number: 65-0914804 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEININYER, SCOTT E
12921 KEYLIME BLVD
WEST PALM BEACH, FL 33412 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: GREEN, DAVID
Address: 7087 155TH PLACE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: ST () Delete
Name: WEININGER, SCOTT E
Address: 12921 KEY LINE BOULEVARD
City-St-Zip: W PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SCOTT E WEININGER

ST

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date