## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

# APPLICATION

### FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

#### 99000082195 DOCUMENT #

1. Corporation Name

## INTENSE INVESTIGATIONS, INC.

Principal Place of Business

Mailing Address

11481 TARA DR

FORT LAUDERDALE FL 33325

11481 TARA DR

FORT LAUDERDALE FL 33325

# FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Suite, Apt. #, etc. Suite,		3. New N	New Mailing Office Address, If Applicable     Suite, Apt. #, etc.  City & State		Date Incorporated or Qualified     To Do Business in Florida     09/13/1999		
		City & Sta			5. FEI Numb	65-0948966	Applied For Not Applicable
Zip	Country	Zip	Country		6. CERTIFICAT	E OF STATUS DESIRED 6	5 Additional Fee require
7. Names	s and Street Addresses of Each Office	and/or Director (	lorida nonprofit corporation	ons must list at le	ast 3 directors)		
Title(s)	Name of Officers 2 and/or Directors		Street Address of Each Officer and/or Director		h	City / State / Zip	
P	UNDERWOOD, JEFFERY		11481 TARA DR		· · · · · · · · · · · · · · · · · · ·	FORT LAUDERDALE FL 33325	
VP	FIELDS, FRED		11481 TARA DRIVE		·	FORT LAUDERDALE FL 33325	
					10/29/	000867010 0201103001 *	150.00 *150.00
			K	11/6			
	8. Name and Address of Curr	ent Registered Ad	lent .	<u> </u>	0 N		
		·	Name and Address of New Registered Agent     Name				
	ARIELLO, JOHN NW 5TH WAY	:	Street Address (P.O. Box Number is Not Acceptable)				
FT. LAUDERDALE FL 33309			Suite, Apt. #, Etc.				
, <u>,,</u>				City		Fi	Zip Code
). I, being	appointed the registered agent of the	above named corp	oration, am familiar with a	and accept the ob	ligations of Section	on 607.0505, F.S. or 617.0505,	F.S.

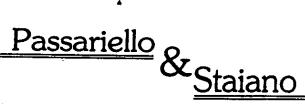
11. Fcertify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

REGISTERED AGENT MUST SIGN

Date 10/22/20



CERTIFIED PUBLIC ACCOUNTANTS • A PROFESSIONAL ASSOCIATION

October 24, 2002

Uniform Business Report **Division of Corporations** P O Box 1500 Tallahassee FL 32302-1500

RE: Taxpayer's Name:

Intense Investigation Inc.

Document Number: P99000082195

Tax Form:

Uniform Business Report

Tax Period:

2002

#### Gentlemen:

We are writing as the accountants for the above referenced client.

Enclosed please find the 2002 Uniform Business Report for the above referenced taxpayer with a check in the amount of \$150.00. The taxpayer had not received the original Uniform Business Report, which was due and payable May 1, 2002. Please accept their fee in the amount of \$150.00 as they had always filed and paid this return timely in the past and this was an unusual and unforeseen occurrence.

If you have any questions, please feel free to call us between the hours of 9 A.M. and 5 P.M. Monday thru Friday at (954) 776-1444.

Sincerely,

PASSARIELLO & STAIANO CPA PA

John Passariello

JP/sr Encl.