


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000711120</b>	
1. Entity Name RLI INVESTIGATIVE AGENCY, INC.	

Principal Place of Business 601 N.W. 46TH AVENUE PLANTATION, FL 33317	Mailing Address P.O. BOX 426 FORT LAUDERDALE, FL 33302
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**DO NOT WRITE IN THIS SPACE**

03162004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0985416	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

SHELOWITZ & SHELOWITZ, P.A.  
 1895 W. COMMERCIAL BLVD.  
 SUITE 135  
 FORT LAUDERDALE, FL 33309

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

U00000092335  
 03/19/04-80004-024 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST INGRAM, ROBERT L JR 601 N.W. 46TH AVENUE PLANTATION, FL 33317
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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: Robert L. Ingram Jr. 3/15/04 (954) 448-8815  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #