

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S80975** (3)

1. Corporation Name

ACTIVE INVESTIGATIONS, INC.



Principal Place of Business

**10343 ROYAL PALM BLVD
SUITE 276
CORAL SPRINGS FL 33065**

Mailing Address

**10343 ROYAL PALM BLVD
SUITE 276
CORAL SPRINGS FL 33065**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/16/1991

3a. Date of Last Report

04/25/1995

4. FEI Number

65-0285001

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name

Patricia H. Saks

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

**10343 Royal Palm Blvd.
Suite 276**

83

84

Coral Springs

FL

33065

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Patricia H. Saks

Date: **4/29/96**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PT**
SAKS, MARK P
STREET ADDRESS **10343 ROYAL PALM BEACH, STE. 276**
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE ☐ DELETE

NAME **VS**
SAKS, PATRICIA H
STREET ADDRESS **10343 ROYAL PALM BEACH, STE. 276**
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **Saks, Mark P.**

1.3 STREET ADDRESS **10343 Royal Palm Blvd., Ste. 276**

1.4 CITY-ST-ZIP **Coral Spring, FL 33065**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **PT - Saks, Patricia H.**

2.3 STREET ADDRESS **10343 Royal Palm Blvd., Ste. 276**

2.4 CITY-ST-ZIP **Coral Springs, FL 33065**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

800001828148

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*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Patricia H. Saks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia H. Saks

4/16/96

954-341-3044

CR2E034 (12/95)