

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000012485 (8)

1. Corporation Name:
INVESTIGATING & RESEARCH DATA, INC.



Principal Place of Business

BOX 1361 N AVE
BOX 1361
MOORE HAVEN FL 33471
US

Mailing Address

BOX 1361 NORTH AVE
BOX 1361
MOORE HAVEN FL 33471
US

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

SYKES, WILLIAM J
1632 NE 177 STREET
NO MIAMI BEACH FL 33162

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.06(2) and 607.15(3), Florida Statutes, I, the above named corporation, submit 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 607.05(3), Florida Statutes.

SIGNATURE

Signature of the person authorized to execute this statement

Signature of the Registered Agent

Date

12. OFFICERS AND DIRECTORS

1. TITLE: D
NAME: SYKES, WILLIAM J
STREET ADDRESS: BOX 1361 8 NORTH AVE
CITY, ST, ZIP: MOORE HAVEN FL

2. TITLE: [] DELETE

3. TITLE: [] DELETE

4. TITLE: [] DELETE

5. TITLE: [] DELETE

6. TITLE: [] DELETE

7. TITLE: [] DELETE

8. TITLE: [] DELETE

9. TITLE: [] DELETE

10. TITLE: [] DELETE

11. TITLE: [] DELETE

12. TITLE: [] DELETE

13. TITLE: [] DELETE

14. TITLE: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: [] Change [] Addition

2. NAME: [] Change [] Addition

3. STREET ADDRESS: [] Change [] Addition

4. CITY, ST, ZIP: [] Change [] Addition

5. TITLE: [] Change [] Addition

6. NAME: [] Change [] Addition

7. STREET ADDRESS: [] Change [] Addition

8. CITY, ST, ZIP: [] Change [] Addition

9. TITLE: [] Change [] Addition

10. NAME: [] Change [] Addition

11. STREET ADDRESS: [] Change [] Addition

12. CITY, ST, ZIP: [] Change [] Addition

13. TITLE: [] Change [] Addition

14. NAME: [] Change [] Addition

15. STREET ADDRESS: [] Change [] Addition

16. CITY, ST, ZIP: [] Change [] Addition

17. TITLE: [] Change [] Addition

18. NAME: [] Change [] Addition

19. STREET ADDRESS: [] Change [] Addition

20. CITY, ST, ZIP: [] Change [] Addition

21. TITLE: [] Change [] Addition

22. NAME: [] Change [] Addition

23. STREET ADDRESS: [] Change [] Addition

24. CITY, ST, ZIP: [] Change [] Addition

25. TITLE: [] Change [] Addition

26. NAME: [] Change [] Addition

27. STREET ADDRESS: [] Change [] Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96

305
9440859

CR2E034 (12/95)