

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000000338

**Entity Name:** LAUTH INVESTIGATIONS INTERNATIONAL, INC.

**FILED**  
**Feb 03, 2014**  
**Secretary of State**  
**CC5876523762**

**Current Principal Place of Business:**

201 N. ILLINOIS STREET  
16TH FLOOR - SOUTH TOWER  
INDIANAPOLIS, IN 46204

**Current Mailing Address:**

201 N. ILLINOIS STREET  
16TH FLOOR - SOUTH TOWER  
INDIANAPOLIS, IN 46204

**FEI Number:** 20-3964356

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LAUTH, THOMAS  
3001 NORTH ROCKY POINT DR. E - STE. 200  
TAMPA, FL 33607 US

*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

**Officer/Director Detail :**

Title	P	Title	S
Name	LAUTH, THOMAS	Name	LAUTH, RAIN
Address	201 N. ILLINOIS ST, 16TH FLOOR-SOUTH TOWE	Address	201 N. ILLINOIS ST, 16TH FLOOR-SOUTH TOWE
City-State-Zip:	INDIANAPOLIS IN 46204	City-State-Zip:	INDIANAPOLIS IN 46204

*I hereby 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 all other like empowered.*

**SIGNATURE:** RAIN LAUTH

**SECRETARY**

**02/03/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date