FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Sandra B. Mortham

			ary of State CORPORATIONS	Secretary of State	
	JMENT # P3280 NVESTIGATIONS, INC.	87 (2)			
Principal Pla	ace of Business	Mailing Address		1	BIBIL DIBIS BIBIL BIBIL BIBIL DIBIL (BB)
8000 AERIAL CENTER 8000 AERIAL CENTER SUITE 300 SUITE 300 MORRISVILLE NC 27560 MORRISVILLE NC 27560-84			0417		
US	E NC 27500	US	V-117	3. Date incorporated or Qualified 02/20/1991	3a. Date of Last Report 02/09/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suito Ar	26			56-1664861	Not Applicable \$8.75 Additional
30ile, At	Suite, Apr. #, etc. 27			5. Certificate of Status Desired	Fee Required
City & St	tale	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30	Florida Statutes 10. Name and Address of New Re	Yes No
	9. Name and Address of Co HE PRENTICE-HALL CORPORA		81 Name	IV. HARRO GILL AUGIESS OF HEW FIE	gistered Agent
12 Sl	RE PREMIOEFIALE COM CIVI 201 HAYS STREET UITE 105 ALLAHASSEE FL 32301	mon orotem, mo.	82 Street Add	iress (P.O. Box Number is Not Acceptat	vie)
			84 City		FL 85 Zip Code
11. Pursua	int to the provisions of Sections 60	7 0502 and 607.1508. Florida State	utes, the above-named cor	poration submits this statement for the pation's board of directors. I hereby accept	
office of agent.	E am familiar with, and accept the	obligations of, Section 607.0505, f	-iorida Statutes.		
12.	Signature, typeo or printed name of register OFFICER:	red agent and title if applicable (NO S AND DIRECTORS	OTE: Registered Agent signature requ	ited when reinstating) ADDITIONS/CHANGES TO OFFK	CERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	MALONE, MICHAEL JOHN		1.2 NAME		
STREET ADDRES			1.3 STREET ADDRESS		
CITY - ST - ZIP	RALEIGH NC	DELETE	1 4 CITY-ST-ZIP		Change Addition
TITLE NAME	FAGGART, DAVID BRENT	☐ DELCT	2 1 TITLE 2.2 NAME		Change C Addition
STREET ADDRES	TARA INITERPROPORT MALLE	Y CRESCENT 621	2.3 STREET ADDRESS		
CITY - ST - ZIP	RALEIGH NC		2. 4 CITY - ST - ZIP		
TOLE	\$	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MALONE, CHRISTOPHER	IT'E AAA	3.2 NAME		
STREET ADDRES	8000 AERIAL CENTER SU MORRISVILLE NC	HE 300	3 3 STREET ADDRESS		
CITY-ST-ZIP	MORRISVILLE NC	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<u></u>	4. 2 NAME		<u> </u>
STREET ADDRES	ss		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME	00		5.2 NAME		
STREET ADDRES	22		5.3 STREET ADDRESS 5.4 City-St-Zip		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRES	ss		6 3 STREFT ADDRESS		
CITY-ST-ZIP	problem oprification to the information	unplied with this filing does not any	6.4 CITY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statute	as I further certify that the
		rt or supplemental annual report is ion or the receiver or trustee empo ied, or on an attachment with an a	s true and accurate and the owered to execute this repo adress.	at my signature shall have the same legor as required by Chapter 607, Florida:	al effect as if made under bath; thi Statules; and that my name