


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 06, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P0000084726**


1. Entity Name  
**A D & D INVESTMENTS INC.**



Principal Place of Business  
**8106 NW 162ND STREET  
 MIAMI, FL**

Mailing Address  
**8106 NW 162ND STREET  
 MIAMI, FL**

**DO NOT WRITE IN THIS SPACE**



04302008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-1038326**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

Applied For  
 Not Applicable

6. Name and Address of Current Registered Agent

**MILIAN, DELIA  
 8106 NW 162ND STREET  
 MIAMI, FL**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reselecting)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2008 Fee will be \$550.00**

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


U00000949379  
 06/03/08 00027 004 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILIAN, ANA 8106 NW 162ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MILIAN, DALIA 8106 NW 162ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILIAN, DELIA 8106 NW 162ND STREET MIAMI, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**  **ANA Milian** **4/29/08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #