

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134152

FILED
Apr 30, 2008
Secretary of State

Entity Name: LA PALMA INVESTMENTS CORP

Current Principal Place of Business:

2498 SW 17 AVE STE #4307
MIAMI, FL 33145

New Principal Place of Business:

1000 PONCE DE LEON BLVD
117
CORAL GABLES, FL 33134

Current Mailing Address:

2498 SW 17 AVE STE #4307
MIAMI, FL 33145

New Mailing Address:

1000 PONCE DE LEON BLVD
117
CORAL GABLES, FL 33134

FEI Number: 65-1166400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATOS, BENJAMIN
2498 SW 17 AVE STE #4307
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MATOS, BENJAMIN
1000 PONCE DE LEON BLVD
117
CORAL GABLES, FL 33134 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: BENJAMIN MATOS

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MATOS, BENJAMIN
Address: 2498 SW 17 AVE STE #4307
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MATOS, BENJAMIN
Address: 1000 PONCE DE LEON BLVD #117
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BENJAMIN MATOS

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date