

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012145

FILED
Feb 20, 2008
Secretary of State

Entity Name: ORLANDO INVESTMENTS CORP.

Current Principal Place of Business:

C/O SANTIAGO STEED,FORTUNE INTERNATIONAL
1300 BRICKELL AVE
MIAMI, FL 33131 US

New Principal Place of Business:

1300 BRICKELL AVE
MIAMI, FL 33131 US

Current Mailing Address:

C/O SANTIAGO STEED,FORTUNE INTERNATIONAL
1300 BRICKELL AVE
MIAMI, FL 33131 US

New Mailing Address:

1300 BRICKELL AVE
MIAMI, FL 33131 US

FEI Number: 20-1786507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, MILAGROS A
1300 BRICKELL AVENUE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

SUAREZ, MARIANELA
1300 BRICKELL AVENUE
MIAMI, FL 33131 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: MARIANELA SUAREZ

02/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BLUM, ALICE
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: S () Delete
Name: BLUM, VIVIAN
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: T () Delete
Name: BLUM, MARICEL
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALICE BLUM

PS

02/20/2008

Electronic Signature of Signing Officer or Director

Date