

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012145

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: ORLANDO INVESTMENTS CORP.

**Current Principal Place of Business:**

1300 BRICKELL AVE  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

1300 BRICKELL AVE  
MIAMI, FL 33131 US

**New Mailing Address:**

FEI Number: 20-1786507      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SUAREZ, MARIANELA  
1300 BRICKELL AVENUE  
MIAMI, FL 33131 US

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

DE LOS SANTOS, OLGA ESQ.  
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: OLGA DE LOS SANTOS, ESQ.      03/04/2009  
\_\_\_\_\_  
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      03/04/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date