


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90117 046 ***150.00

DOCUMENT # P03000031747					
1. Entity Name BETTER INVESTMENTS, INC.					
Principal Place of Business 800 W. CYPRESS CREEK RD. SUITE 465 FT. LAUDERDALE, FL 33309		Mailing Address 800 W. CYPRESS CREEK RD. SUITE 465 FT. LAUDERDALE, FL 33309			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04182008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent			4. FEI Number 51-0463686		
LEGEL, LARRY 800 W. CYPRESS CREEK RD., #470 FT. LAUDERDALE, FL 33309			Applied For <input type="checkbox"/> Not Applicable		
7. Name and Address of New Registered Agent			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
Name LEGEL, LARRY Street Address (P.O. Box Number is Not Acceptable) 800 W. CYPRESS CREEK RD., #465 City FT. LAUDERDALE FL Zip Code 33309					
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: <i>Larry Legel</i>		(NOTE: Registered Agent signature required when reinstating)		DATE: 4/21/08	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DPST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LEGAL, LARRY		NAME		
STREET ADDRESS	800 W CYPRESS CREEK RD, # 470		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309		CITY-ST-ZIP		
TITLE	DV	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LEGAL, BRENDA		NAME		
STREET ADDRESS	800 W CYPRESS CREEK ROAD, SUITE #470		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <i>Larry Legel</i>		LARRY LEGEL PRES		4/21/08 954 493 8900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	