

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029289

FILED
Apr 19, 2005
Secretary of State

Entity Name: NEW HORIZON INVESTMENT GROUP, INC

Current Principal Place of Business:

16749 NW 13 COURT
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

16749 NW 13 COURT
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 20-0721759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORIYON, LUIS E
16749 NW 13 COURT
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORIYON, LUIS E
Address: 16749 NW 13 COURT
City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORIYON, LUIS E PRESIDE
Address: 16749 NW 13 COURT
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Change (X) Addition
Name: CONEJEROS, MANUEL H VICE-PR
Address: 1440 BRIDFORD PARKWAY APT J
City-St-Zip: GREENSBORO, NC 27407

Title: TR () Change (X) Addition
Name: HIDALGO, AUBERTO TREASUR
Address: 17901 NW 5TH STREET., SUITE 101
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS E. MORIYON

PRES

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date