


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000075898
 1. Entity Name
 2081 INVESTMENT CORP.



Principal Place of Business: 2081 SOUTH OCEAN DRIVE, HALLANDALE, FL 33009
 Mailing Address: 1800 ENGLISH ROAD, SUITE 1, ROCHESTER, NY 14616 US

DO NOT WRITE IN THIS SPACE



01232005 No Chg-P CR2E034 (10/03)
 4. FEI Number: 65-0459601 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPORATION INFORMATION SERVICES INC.
 1201 HAYS ST.
 TALLAHASSEE, FL 32301

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000260682
 03/12/05-80034-015 150.00

10. OFFICERS AND DIRECTORS	
TITLE	S
NAME	LISSOW, MARY L
STREET ADDRESS	2081 SOUTH OCEAN DRIVE, # 103
CITY-ST-ZIP	HALLANDALE, FL 33009
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Mary Lissow Date: 2/20/05 Daytime Phone #: 585-227-0760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR