


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000078485

1. Entity Name
 NAYANI INVESTMENT, CORP.



Principal Place of Business Mailing Address

7270 NW 66ST 7270 NW 66ST
 MIAMI, FL 33166 MIAMI, FL 33166 US

DO NOT WRITE IN THIS SPACE



01182008 No Chg-P CR2E034 (11/05)

4. FEI Number
 65-0880072 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent.

ROA ZOPPI, GERMAN
 7270 NW 66TH STREET
 MIAMI, FL 33166

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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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

U000000819612
 02/15/08-80091-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MUSTAFA, JOSE
STREET ADDRESS	10730 NW 66TH ST #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	VP
NAME	MUSTAFA, NAHIMA
STREET ADDRESS	161 PALMETTO DRIVE
CITY-ST-ZIP	MIAMI SPRINGS, FL 33166
TITLE	S
NAME	MUSTAFA, RAMONA
STREET ADDRESS	10730 NW 66TH ST #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	D
NAME	MUSTAFA, NIURKA
STREET ADDRESS	10730 NW 66TH ST #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	D
NAME	MUSTAFA, YASSER
STREET ADDRESS	10730 NW 66TH ST #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	D
NAME	ROA ZOPPI, GERMAN
STREET ADDRESS	7270 NW 66TH STREET
CITY-ST-ZIP	MIAMI, FL 33166

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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: Gep 1/28/08 786-229 2126

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #