2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 565169

Entity Name: 33RD AVE. INVESTMENTS, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2237 N. COMMERCE PARKWAY, SUITE #3 ONE EAST BROWARD BLVD. WESTON, FL 33326

SUITE #1010

FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

2237 N. COMMERCE PARKWAY, SUITE #3 ONE EAST BROWARD BLVD.

WESTON, FL 33326 SUITE #1010

FORT LAUDERDALE, FL 33301

FEI Number: 65-0119150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MANELLA, ROSS H ESQ MANELLA, ROSS H ESQ ONE EAST BROWARD BLVD. 2237 N. COMMERCE PARKWAY, SUITE #3

WESTON, FL 33326 US SUITE #1010

FORT LAUDERDALE, FL 33301 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: ROSS H. MANELLA ESQ 04/27/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PSTD** () Delete Title: () Change () Addition

Name: BRISSON, JEAN CLAUDE, Name: 1080 ST MATHIEU, APT 203 Address: Address: City-St-Zip: MONTREAL PQ CANADA H3H 2S8, City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

DESCHAMPS, MARCELLE Name: Name: 1080 ST MATHIEU, APT 203 Address: Address: MONTREAL PQ CANADA H3H 2S8, City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

BRISSON, CATHERINE Name: Name: 1080 ST MATHIEU , APT 203 Address: Address: City-St-Zip: MONTREAL, QU City-St-Zip:

Title: () Delete Title: () Change () Addition

BRISSON, GREGOIRE Name: Name: Address: 1080 ST MATHIEU, APT 203 Address: City-St-Zip: MONTREAL, QU City-St-Zip:

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: JEAN CLAUDE BRISSON **PSTD** 04/27/2005