

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000038510

FILED
Mar 17, 2009
Secretary of State

Entity Name: CAWY INVESTMENTS CORP.

Current Principal Place of Business:

C/O WILLIAM YIDI
6942 NW 50TH ST
MIAMI, FL 33166 US

New Principal Place of Business:

C/O WILLIAM YIDI
6942 NW 50TH ST
MIAMI, FL 33166 US

Current Mailing Address:

2121 PONCE DE LEON BLVD
STE 330
CORAL GABLES, FL 33134 US

New Mailing Address:

1430 S. DIXIE HIGHWAY
STE 321
CORAL GABLES, FL 33146 US

FEI Number: 85-0450212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, MICHAEL
2121 PONCE DE LEON BLVD
STE 330
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ORTIZ, MICHAEL
1430 S. DIXIE HIGHWAY
STE 321
CORAL GABLES, FL 33146 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: MICHAEL ORTIZ

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: QUINTERO, CARLOS YIDI
Address: 6942 NW 50TH STREET
City-St-Zip: MIAMI, FL 33166

Title: DV () Delete
Name: QUINTERO, ANDRES YIDI
Address: 6942 N.W. 50TH STREET
City-St-Zip: MIAMI, FL

Title: DP () Delete
Name: QUINTERO, WILLIAM YIDI
Address: 6942 N.W. 50TH STREET
City-St-Zip: MIAMI, FL 33166

Title: S () Delete
Name: ORTIZ, MICHAEL
Address: 2121 PONCE DE LEON BLVD, #330
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL ORTIZ

RA

03/17/2009

Electronic Signature of Signing Officer or Director

Date