## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT

## **DOCUMENT # 380456**

1. Entity Name

THE PLACE INVESTMENT, INC.



**FILED** May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

7900 MIAMI LAKE DR W MIAMI LAKE, FL 33016

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## DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 04242006

4. FEI Number 59-1354410

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, CHRISTY 7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016

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<u> </u>					
	rnamed entity submits this statement for the places of registered agent.	urpose of changing its registered of	ITICE OF N	egistered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	applicable (NQTF, Registered Age	nt signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	, _	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KISLAK, JAY I. 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016				U00000546494
TITLE NAME STREET ADDRESS	DPT BARTELMO, THOMAS 7900 MIAMI LAKES DRIVE WEST				05/11/06-80119-007 150.00

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CITY-ST-ZIP MIAMI LAKES, FL 33016 TITLE NAME LUBOW, CHERYL 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS CITY-ST-ZIP MIAMI LAKES, FL 33016 TITLE RODRIGUEZ, CHRISTY STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST CITY-ST-ZIP MIAMI LAKES, FL 33016 TITLE NAME BRAUN, STEPHEN

12. I hereby certify that the information supplied with this filling 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 addiges, with all other like empowered.

SIGNATURE:

STREET ADDRESS

CITY-SI-ZIP

ME NAME STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST

MIAMI LAKES, FL 33016