## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Feb 13, 2008 08:00 AN Secretary of State **DOCUMENT # 505116** 1. Entity Name SAN MARCO ISLAND INVESTMENTS, INC. Principal Place of Business Mailing Address 201 S BISCAYNE BLVD 24TH FLOOR 201 S BISCAYNE BLVD 24TH FLOOR MIAMI, FL 33131 US MIAMI, FL 33131 US 01172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1960536 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NACLERIO, STEVEN ESQ DO NOT WRITE 201 S BISCAYNE BLVD 24TH FLOOR MIAMI, FL 33131 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME RODRIGUEZ, MANON GRAU EDGEWATER DRIVE, LYFORD CAY NASSAU STREET ADDRESS CITY-ST-ZIP BAHAMAS. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRI CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - 7IP

**FILED**