


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 595254		
1. Entity Name OLGEVA INVESTMENT CORP.		
Principal Place of Business 1121 ANDORA AVE. MIAMI, FL 33146-3214 US	Mailing Address 1121 ANDORA AVE. MIAMI, FL 33146-3214 US	



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1872520	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

VAZQUEZ, GEORGE  
1121 ANDORA AVENUE  
CORAL GABLES, FL 33146

**DO NOT WRITE  
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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(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

U00000822384  
02/19/08-80060-018 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP VAZQUEZ, OLGA 1121 ANDORA AVENUE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT VAZQUEZ, GEORGE A. 1121 ANDORA AVENUE CORAL GABLES, FL
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**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George A. Vazquez, Pres

2/7/08

Date

(305) 467-3410

Daytime Phone #