2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 611548

1. Entity Name
SUA-CHA INVESTMENTS, INC.

Principal Place of Business	Mailing Address
1355 SOUTHWEST 6 STREET #1 MIAMI, FL 33135	1355 SW 6TH ST APT 1 MIAMI, FL 33135 US

DO NOT WRITE IN THIS SPACE

01192007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SUAREZ PULIBO, OSVALDO
1355 SW 6TH ST
APT 1
MIAMI, FL 33135

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 _____

<small>Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)</small>

U000000611479
02/02/07-80163-014 8.75
DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U000000611479
02/02/07-80163-013 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	PULIDO, OSVALDO S
STREET ADDRESS	ANDALUCIA #519
CITY-ST-ZIP	PUERTO RICO, 00920

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

786-247-4406

SIGNATURE: _Osvaldo Suarez (President) Jan-19-2007_

<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #</small>