

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 662201

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: L.G.L. INVESTMENT CORP.

## Current Principal Place of Business:

P.O. BOX 145035  
CORAL GABLES, FL 331145035

## New Principal Place of Business:

308 ALEDO AVENUE  
CORAL GABLES, FL 33134

## Current Mailing Address:

P.O. BOX 145035  
CORAL GABLES, FL 331145035

## New Mailing Address:

FEI Number: 59-1995461      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEA, MARIA A.  
8600 SW 86 AVE  
MIAM, FL 33743      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SVP      ( ) Delete  
Name: TASSI, MARIA A  
Address: 8600 SW 86 AVE  
City-St-Zip: MIAMI, FL 33143

Title: T      ( ) Delete  
Name: STEA, EMILIA ALONSO, DE  
Address: 308 ALEDO AVE  
City-St-Zip: CORAL GABLES, FL

Title: DP      ( ) Delete  
Name: LEONARDO VITO, STEA  
Address: 308 A 1000 AVENUE  
City-St-Zip: CORAL GABLES, FL

## 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:

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: MARIA A TASSI

SVP

03/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date