

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855873

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: C.A.O.G. INVESTMENTS CORPORATION

## Current Principal Place of Business:

% RAMON MIYAR  
2588 S.W. 27 AVENUE  
MIAMI, FL 33133

## New Principal Place of Business:

%A & E GARCIA, P. A.  
2121 PONCE DE LEON, STE. 1050  
CORAL GABLES, FL 33134

## Current Mailing Address:

% RAMON MIYAR  
2588 S.W. 27 AVENUE  
MIAMI, FL 33133

## New Mailing Address:

%A & E GARCIA, P. A.  
2121 PONCE DE LEON, STE. 1050  
CORAL GABLES, FL 33134

FEI Number: 98-0070210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIYAR, RAMON  
2588 S.W. 27 AVENUE  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

CONSULTING SERVICES OF S. FLORIDA  
2121 PONCE DE LEON  
1050  
CORAL GABLES, FL 33134 US

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: EILEEN GARCIA

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PEREZ MIJARES, OSCAR,  
Address: CTRO MONACO, TORRE S, PISO 5, AVE PRIN.  
City-St-Zip: LOS RUICES, CARACAS, VA

Title: VTD ( ) Delete  
Name: DE PEREZ, BENITA MOL, INO  
Address: CTRO MONACO, TORRE S, PISO 5, AVE PRIN.  
City-St-Zip: LOS RUICES, CARACAS, VA

Title: SD ( ) Delete  
Name: CONDE BARROZZI, JUAN,  
Address: CTRO MONACO, TORRE S, PISO 5, AVE PRIN.  
City-St-Zip: LOS RUICES, CARACAS, VA

## 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 for the exemption stated in Section 119.07(3)(i), 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: OSCAR PEREZ MIJARES

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date