## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000005018

Entity Name: CORAL PORTFOLIO INVESTMENTS. INC

FILED Jan 18, 2006 Secretary of State

Entity Na	Me: CORALI	PORTFOLIO INVESTMENTS,	INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
151 REGIO DESTIN, F	ONS WAY, SU FL 32541	ITE 2A				
Current Mailing Address:			New Mailing Address:			
151 REGIO DESTIN, F	ONS WAY, SU FL 32541	ITE 2A				
FEI Number	FEI Number: 86-1088306 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	d Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	OUTIS, ROBER ONS WAY, SU FL 32541 U	ITE 2A				
	e named entity e of Florida.	submits this statement for the	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	MALONEY, JO 15400 EMERA BIG CANOE, G VCP ( COLLINS, H. E	LD COAST PKWY A 30143 ) Delete UGENE	Title: Name: Address: City-St-Zip: Title: Name:	MALONEY, J 15400 EMER DESTIN, FL	RALD COAST PKWY	
Address: City-St-Zip:	0034 PETIT RI BIG CANOE, G	A 30143	Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	MALONEY, MA	LD COAST PKWY	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DT ( CHALAVOUTIS 3797 MISTY W DESTIN, FL 3:	AY	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT CHALAVOUTIS DT 01/18/2006