## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F07532

1. Entity Name
GENANN INVESTMENT CORPORATION



FILED Apr 25, 2008 08:00 AN Secretary of State

Principal Place of Business

SIGNATURE:

C/O RICHARD ABRAMOWITZ 7800 W OAKLAND PARK BLVD. #101 SUNRISE, FL 33351-6751 Mailing Address

C/O RICHARD ABRAMOWITZ 7800 W OAKLAND PARK BLVD. #101 SUNRISE, FL 33351-6751



04142008

No Chg-P

CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABRAMOWITZ, RICHARD 7800 W OAKLAND PARK BLVD. #101 SUNRISE, FL 33321

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<ol> <li>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.</li> </ol>				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				
10. OFFICERS AND DIRECTORS			Karata Barata Barata Barata	A CONTRACTOR OF THE STATE OF TH
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABRAMOWITZ, RICHARD 7800 W OAKLAND PARK SUNRISE, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1000000921272 105/14/08-80076-025 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN.	THIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. Thereby certify that the information supplied with this filling does not auglify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental/eport 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 priner light empowered.				