

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F48069

FILED  
Jun 09, 2005  
Secretary of State

Entity Name: KING OAK INVESTMENT CORPORATION

## Current Principal Place of Business:

2498 SW 17TH AVE.  
APT. 4103  
MIAMI, FL 33145

## New Principal Place of Business:

11111 BISCAYNE BLVD.  
SUITE. 3-351  
MIAMI, FL 33181

## Current Mailing Address:

P.O. BOX 450-427  
MIAMI, FL 33245

## New Mailing Address:

11111 BISCAYNE BLVD.  
SUITE 3-351  
MIAMI, FL 3-351

FEI Number: 59-2207727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARRES, MARTA  
2498 SW 17TH AVE. #4103  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

GABALDON, JUAN  
11111 BISCAYNE BLVD.  
SUITE 3-351  
MIAMI, FL 33181 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: JUAN GABALDON

06/09/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GABALDON, AGUSTIN  
Address: 605 OAKS DR #909  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VS ( ) Delete  
Name: GABALDON, JUAN JOSE JAVI  
Address: 605 OAKS DR #909  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VT ( ) Delete  
Name: GABALDON, AIDA RODRIGUEZ  
Address: 605 OAKS DR #909  
City-St-Zip: POMPANO BEACH, FL 33069

Title: V ( ) Delete  
Name: GABALDON, FABRICIO  
Address: 605 OAKS DR #909  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GABALDON, AGUSTIN  
Address: 605 OAKS DRIVE UNIT 909  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VS (X) Change ( ) Addition  
Name: GABALDON, NINNELLA  
Address: 11111 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33181

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: NINNELLA GABALDON

VS

06/09/2005

Electronic Signature of Signing Officer or Director

Date