


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90071 038 ***150.00

DOCUMENT # F93000000110	
1. Entity Name KAYSER INVESTMENTS, S.A.	

Principal Place of Business 4001 N. OCEAN BLVD., #401B BOCA RATON, FL 33431	Mailing Address 4001 N. OCEAN BLVD., #401B BOCA RATON, FL 33431
---	---

DO NOT WRITE IN THIS SPACE



01182007 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VAN BERGH, ANITA 4001 N. OCEAN BLVD #401B BOCA RATON, FL 33431
--

DO NOT WRITE IN THIS SPACE

8. 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE PC	TORO, ALVARO
NAME	4001 N OCEAN BLVD #401B
STREET ADDRESS	BOCA RATON, FL 33431
CITY-ST-ZIP	
TITLE SD	TORO, MARI A
NAME	4001 N OCEAN BLVD #401B
STREET ADDRESS	BOCA RATON, FL 33431
CITY-ST-ZIP	
TITLE TD	TORO, MARIA E
NAME	4001 N OCEAN BLVD #401B
STREET ADDRESS	BOCA RATON, FL 33431
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 other like empowered.

SIGNATURE: *Alvaro Toro* **ALVARO TORO** *February 21/07* **561 3916093**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #