## **2008 FOR PROFIT CORPORATION**

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## FILED **ANNUAL REPORT** Mar 20, 2008 08:00 A **DOCUMENT # F93000000110 Secretary of State** 1. Entity Name KAYSER INVESTMENTS, S.A. Principal Place of Business Mailing Address 4001 N. OCEAN BLVD., #401B 4001 N. OCEAN BLVD., #401B BOCA RATON, FL 33431 BOCA RATON, FL 33431 02272008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VAN BERGH, ANITA DO NOT WRITE 4001 N. OCEAN BLVD #401B BOCA RATON, FL 33431 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. Signature, typed or printed name of registered enert and title if explicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. BLE NAME TORO, ALVARO 4001 N OCEAN BLVD #401B STREET ADDRESS BOCA RATON, FL 33431 CITY-ST-ZIP IIILE TORO, MARI A U00000864605 4001 N OCEAN BLVD #4018 STREET ADDRESS 04/04/08-80021-014 150.00 CITY-ST-ZIP BOCA RATON, FL 33431 TD TITLE TORO, MARIA E NAME STREET ADDRESS 4001 N OCEAN BLVD #401B DO NOT WRITE CITY-ST-ZIP BOCA RATON, FL. 33431 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 tips empowered.

SIGNATURE:	sus vos	ALVARO	TORO	anance	13,2008 (561)	39/6093
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	Daytime Phone #	