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Sep 13, 2007 8:00 am
Secretary of State
08-20-2007 90054 005 ***550.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J47490

1. Entity Name
LAPLANA INVESTMENTS, INC.

Principal Place of Business	Mailing Address
2655 LE JEUNE ROAD SUITE 323 CORAL GABLES, FL 33134	2655 LE JEUNE ROAD SUITE 323 CORAL GABLES, FL 33134

66021963

07062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0000219
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAPLANA, LUIS
2655 LEJEUNE ROAD, S. 323
CORAL GABLES, FL 33134

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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 _____ DATE
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	LAPLANA, LUIS
STREET ADDRESS	2655 LE JEUNE ROAD #323
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	VPS
NAME	BIGOTT, ANA M
STREET ADDRESS	2655 LE JEUNE ROAD #323
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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: LUIS LAPLANA 9/7/07 1-305-394-8766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #