

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # J75911 1. Entity Name T.L.A. INVESTMENTS, INC.	
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Principal Place of Business C/O RED BIRD AMOCO 5701 BIRD RD. MIAMI, FL 33155-5301 US	Mailing Address C/O BLAKESBERG & CO CPAS 951 SW 4TH AVE BOCA RATON, FL 33432-5803 US
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DO NOT WRITE IN THIS SPACE



03242008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2819151	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BLAKESBERG, WILLIAM
951 SW 4TH AVE
BOCA RATON, FL 33432

**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:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FINKELSTEIN, ENRIQUE
STREET ADDRESS	5701 BIRD RD.
CITY-ST-ZIP	MIAMI, FL 331555301

TITLE	SVP
NAME	FINKELSTEIN, ESTHER
STREET ADDRESS	5701 BIRD RD.
CITY-ST-ZIP	MIAMI, FL 331555301

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/15/08-80021-009 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Enrique Finkelstein 3/27/08 305-284-8001