2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000016190

1. Entity Name

I.A. INVESTMENTS, LLC



Jan 25, 2008 08:00 A Secretary of State

Principal Place of Business

210 71ST STREET MIAMI BEACH, FL 33141 Mailing Address 210 71ST STREET MIAMI BEACH, FL 33141



01082008 No Chg-LLC

CR2E083 (12/07)

FILED

SPACE	4. FEI Number 47-0876510			pplied For lot Applicable
	5. Certificate of Status Desired		\$5.00 Ac	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PIOTRKOWSKI, JOEL S 317 71ST STREET MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE

MININI BEACH, I E 35141		IN THIS SPACE			
		, Constitution of Florida Cons			
	named entity submits this statement for the purpose of changing its registerd ions of registered agent.	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
SIGNATURE_		Agent signature required when reinstating) DATE			
FILE After May	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME STREET ADDRESS	AMSALEM, ISAAC 210 71 STREET 309	·			
CITY-ST-ZIP	MIAMI, FL 33411				
TITLE	MGRM	H0000798056			
NAME	YEHEZKEL, HAIM	U0000798056 01/30/08-80013-010 138.75			
STREET ADDRESS	210 71ST STREET				
CITY-ST-ZIP	MIAMI BEACH, FL 33141				
TITLE					
NAME	_				
STREET ADDRESS		DO NOT WRITE			
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NAME					
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CITY-ST-ZIP	attention and internation and individual to the state of	analism analogod in Chapter 110 Florida Statutos Liuribar partifu that the information			

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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #