2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078389

Entity Name: IFP INVESTMENTS, LLC

City-St-Zip:

WESTON, FL 33332

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2947 LAKE RIDGE LANE WESTON, FL 33332 **Current Mailing Address: New Mailing Address:** 2947 LAKE RIDGE LANE WESTON, FL 33332 FEI Number: 20-1836793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERNANDEZ, JOSE L 2947 LAKE RIDGE LANE WESTON HILLS, FL 33327 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete FERNANDEZ, ISABEL Name: Name: Address: 2947 LAKE RIDGE LANE Address: City-St-Zip: WESTON, FL 33332 City-St-Zip: Title: MGR () Delete Title: () Change () Addition FERNANDEZ, JOSE L Name: Name: Address: 2947 LAKE RIDGE LANE Address: City-St-Zip: WESTON, FL 33332 City-St-Zip: Title: MGR () Delete Title: () Change () Addition FERNANDEZ, IGNACIO Name: Name: 2947 LAKE RIDGE LANE Address: Address: City-St-Zip: WESTON, FL 33332 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ISABELLA, FERNANDEZ Name: 2947 LAKE RIDGE LANE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: JOSE FERNANDEZ PRES 04/28/2009