2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L55030

1. Entity Name 1830 INVESTMENTS, INC.



FILED Apr 21, 2004 08:00 AM Secretary of State

Principal Place of Business

2429 RALEIGH ST. HOLLYWOOD, FL 33020 US Mailing Address

2429 RALEIGH ST.

HOLLYWOOD, FL 33020 US

> 03242004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0178904

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytimo Phone #

6. Name and Address of Current Registered Agent

SALZANI, ALFREDO 2429 RALEIGH ST. HOLLYWOOD, FL 33020

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	named entity submits this statement for the poons of registered agent.	urpose of changing its registe	ered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar w	ith, and accept
SIGNATURE_	Signature, typod or printed name of registered agent and tale is	applicable (NOTE Registr	ered Agent signalure	e required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	100000123307 04/21/04-80065-020	150.00
10.	OFFICERS AND DIREC	TORS				
TITLE NAME SIREET ADDRESS CITY-ST-ZIP	D SALZANI, ALFREDO 2429 RALAIGH ST. HOLLYWOOD, FL 33020					
TATEL NAME STREET ADDRESS CATY - ST - ZAP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY - ST- ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZP					-	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 his 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 line empowered.						

E AND TYPED OR PRINTED NAME OF SIGHING OFFICER OR DIRECTOR