2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 08:00 A Secretary of State DOCUMENT # L74300 FUENTECH INVESTIGATIONS, INC. Principal Place of Business Mailing Address 1 NE 2ND AVENUE 1 NE 2ND AVENUE SUITE 200 SUITE 200 MIAMI, FL 33132 US MIAMI, FL 33132 CR2E034 (11/05) 04112007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0253265 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **FUENTES, CARLOS** DO NOT WRITE 1 NE 2ND AVENUE SUITE 200 IN THIS SPACE MIAMI, FL 33132 8. The above nam tement 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 ame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME **FUENTES, CARLOS** 1 N.E. 2 AVENUE, SUITE J200 STREET ADDRESS CITY-S1-ZIP MIAMI, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS U00000722060 CITY-ST-ZIP :05/02/07-80016-010 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP ormation supplied with this tiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information uppermental about a securate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director 12. I hereby certify that the ocurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director kecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this repo of the corporation or vered to exe 9 SIGNATURE:

IRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #