

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 23, 2006 08:00 AM**  
**Secretary of State**

|                                                                                 |                                                                                   |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # L95467</b><br>1. Entity Name<br><b>807 INVESTMENT CORPORATION</b> |  |
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|                                                                                     |                                                                         |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Principal Place of Business<br><b>1055 WASHINGTON AVE<br/>MIAMI BEACH, FL 33139</b> | Mailing Address<br><b>1055 WASHINGTON AVE<br/>MIAMI BEACH, FL 33139</b> |
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02022006 No Chg-P CR2E034 (11/05)

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| 4. FEI Number<br><b>65-0216345</b>                                                              | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                        |

|                                                                                                                                 |
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| 6. Name and Address of Current Registered Agent<br><br><b>RODRIGUEZ, OLGA<br/>1055 WASHINGTON AVE<br/>MIAMI BEACH, FL 33139</b> |
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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.

|                                                                                                                                                                             |            |
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| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reappointing)</small> | DATE _____ |
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|                                                                               |                                                                                                                           |
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| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
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| 10. OFFICERS AND DIRECTORS                     |                                                                                        |
|------------------------------------------------|----------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PST<br/>RODRIGUEZ, OLGA<br/>1055 WASHINGTON AVE<br/>MIAMI, FL 331385017</b>         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPO<br/>RODRIGUEZ, OLGA M<br/>1055 WASHINGTON AVE<br/>MIAMI, FL 331385017</b>       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>ST<br/>RODRIGUEZ, ACOSIE JOSE<br/>1055 WASHINGTON AVE<br/>MIAMI BEACH, FL 33139</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                        |

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03/07/06-80004-005 150.00

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.

|                                                                                                                                                                                                        |
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| SIGNATURE: <u>Olga M Rodriguez</u> <u>Olga Rodriguez</u> <u>2/3/06</u> <u>(305) 673-6969</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> |
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