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Apr 28, 2008 8:00 am
Secretary of State
04-28-2008 90400 031 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M14612

1. Entity Name
NETWORK INVESTMENTS, INC.

Principal Place of Business	Mailing Address
~~6255 BIRD RD~~	~~6255 BIRD RD~~
~~MIAMI, FL 33155 US~~	~~MIAMI, FL 33155 US~~

04022008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
6361 Sunset DR	6361 Sunset DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State: Miami, FL
Zip: 33143 Country:	Zip: 33143 Country:

4. FEI Number: 59-2557192 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ZULUETA, IGNACIO G. 6255 BIRD RD MIAMI, FL 33155	Name: ZULUETA, IGNACIO G. Street Address (P.O. Box Number is Not Acceptable): 6361 Sunset DR City: Miami FL Zip Code: 33143

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.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DS ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	ZULUETA, IGNACIO	NAME	
STREET ADDRESS	6255 BIRD ROAD	STREET ADDRESS	6361 Sunset DR
CITY-ST-ZIP	MIAMI, FL 33155	CITY-ST-ZIP	Miami, FL 33143
TITLE	P ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	ZULUETA, JORGE A	NAME	
STREET ADDRESS	6255 BIRD ROAD	STREET ADDRESS	6361 Sunset DR
CITY-ST-ZIP	MIAMI, FL 33155	CITY-ST-ZIP	Miami, FL 33143
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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.

SIGNATURE: Ignacio G. Zulueta 4/21/08 305-669-2906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #