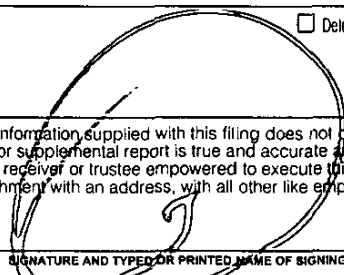


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90400 031 ***150.00

DOCUMENT # M14612 1. Entity Name NETWORK INVESTMENTS, INC.					
Principal Place of Business 6255 BIRD RD MIAMI, FL 33155 US			Mailing Address 6255 BIRD RD MIAMI, FL 33155 US		
2. Principal Place of Business - No P.O. Box # 6361 Sunset DR Suite, Apt. #, etc.		3. Mailing Address 6361 Sunset DR Suite, Apt. #, etc.			
City & State Miami, FL		City & State Miami, FL		4. FEI Number 59-2557192	
Zip 33143		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZULUETA, IGNACIO G. 6255 BIRD RD MIAMI, FL 33155			7. Name and Address of New Registered Agent 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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	DS ZULUETA, IGNACIO 6255 BIRD ROAD MIAMI, FL 33155	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZULUETA, JORGE A 6255 BIRD ROAD MIAMI, FL 33155	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6361 Sunset DR Miami, FL 33143	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6361 Sunset DR Miami, FL 33143	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
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 #					