

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90266 033 \*\*\*150.00

**DOCUMENT # M28821**

1. Entity Name

SU INVESTMENT CORPORATION



Principal Place of Business

12185 S DIXIE HWY  
MIAMI FL 33156  
US

Mailing Address

12185 S DIXIE HWY  
MIAMI FL 33156  
US



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2648590

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

SU, JAMES  
12185 SOUTH DIXIE HWY  
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 resigning)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME SU, HILDA  
STREET ADDRESS ~~8905 S.W. 102 TERRACE~~  
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE D  
NAME SU, SIXTO  
STREET ADDRESS ~~8905 S.W. 102 TERRACE~~  
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE D  
NAME SU, SIXTO HENRY  
STREET ADDRESS ~~10733 GW 110TH CT.~~  
CITY-ST-ZIP MIAMI FL ~~33186~~ ☐ Delete

TITLE D  
NAME SU, JAMES  
STREET ADDRESS ~~8905 S.W. 102 TERRACE~~  
CITY-ST-ZIP MIAMI FL ~~33176~~ ☐ Delete

TITLE D  
NAME SU, DAVID  
STREET ADDRESS ~~8905 S.W. 102 TERRACE~~  
CITY-ST-ZIP MIAMI FL ~~33176~~ ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 12185 South Dixie Hwy  
CITY-ST-ZIP Miami FL 33156

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 12185 South Dixie Hwy  
CITY-ST-ZIP Miami FL 33156

TITLE ☒ Change ☐ Addition  
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CITY-ST-ZIP Miami FL 33156

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES SU

3-17-06

Date

(305) 251-7616

Daytime Phone #