


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000026811**

1. Entity Name  
**SPOLI INVESTMENTS, INC.**



Principal Place of Business  
**44 LIONS PAW GRAND  
DAYTONA BEACH, FL 32124**

Mailing Address  
**44 LIONS PAW GRAND  
DAYTONA BEACH, FL 32124**

**DO NOT WRITE IN THIS SPACE**



01122007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-3630728**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**OLI, PAMELA  
44 LIONS PAW GRAND  
DAYTONA BEACH, FL 32124**

**DO NOT WRITE  
IN THIS SPACE**

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: *Pamela Oli* (NOTE: Registered Agent signature required when renewing)

DATE: 1/23/07

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	OLI, PAMELA
STREET ADDRESS	44 LIONS PAW GRAND
CITY-ST-ZIP	DAYTONA BEACH, FL 32124
TITLE	VP
NAME	OLI, SAMPSON
STREET ADDRESS	44 LIONS PAW GRAND
CITY-ST-ZIP	DAYTONA BEACH, FL 32124
TITLE	S
NAME	OLI, PRINCE
STREET ADDRESS	1144 BARBARA DRIVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32117
TITLE	T
NAME	ASIEGBU, JULIET
STREET ADDRESS	1144 BARBARA DRIVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32117
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

000000602757  
01/26/07-80103-021 150.00

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.

SIGNATURE: *Pamela Oli* 1/23/07 Date

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR