
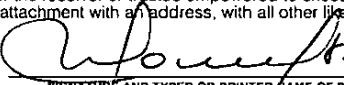


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90021 014 ***150.00

DOCUMENT # P00000041751																																																																																																																																																											
1. Entity Name FLOLAM INVESTMENTS, INC.																																																																																																																																																											
Principal Place of Business 21055 YACHT CLUB DR MIAMI, FL 33180			Mailing Address 21055 YACHT CLUB DR MIAMI, FL 33180																																																																																																																																																								
2. Principal Place of Business - No P.O. Box # 21055 YACHT CLUB DR		3. Mailing Address 21055 YACHT CLUB DR																																																																																																																																																									
Suite, Apt. #, etc. APT 3102		Suite, Apt. #, etc. APT 3102																																																																																																																																																									
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Zip 33180	Country		Zip 33180	Country																																																																																																																																																							
6. Name and Address of Current Registered Agent FLOREZ, MIRIAM 21055 YACHT CLUB DR MIAMI, FL 33180			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ State 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 5px;">11. 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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: 			03-01-08																																																																																																																																																								
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>																																																																																																																																																								