2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000069886

1. Entity Name
FORET INVESTMENTS INC.

Principal Place of Business	Mailing Address
1257 NW 3 ST. MIAMI, FL 33125	P.O. BOX 22805 MIAMI, FL 33222

04082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1025674
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CONSTATINO, DESSIMONE
11347 SW 85 LANE
MIAMI, FL 33173

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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: _____ DATE 4/8/2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

U00000895695
04/24/08-80077-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DESSIMONE, CONSTANTINO
STREET ADDRESS	11347 S.W. 85 LANE
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	S
NAME	PEREZ, FRANCISCO S
STREET ADDRESS	1231 LISBON ST
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	T
NAME	PALACIOS, MYRIAM
STREET ADDRESS	P.O. BOX 228055
CITY-ST-ZIP	MIAMI, FL 33222
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 4/8/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #