

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P00000069886 1. Entity Name FORET INVESTMENTS INC.	
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Principal Place of Business 1257 NW 3 ST. MIAMI, FL 33125	Mailing Address P.O. BOX 22805 MIAMI, FL 33222
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DO NOT WRITE IN THIS SPACE



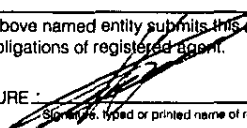
04082008 No Chg-P CR2E034 (11/05)

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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**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.

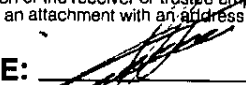
SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE: **4/8/2008**

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	U000000895695 04/24/08-80077-011 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DESSIMONE, CONSTANTINO 11347 S.W. 85 LANE MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PEREZ, FRANCISCO S 1231 LISBON ST MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PALACIOS, MYRIAM P.O. BOX 228055 MIAMI, FL 33222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 #