

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052662

FILED
Apr 07, 2005
Secretary of State

Entity Name: L.O. INVESTMENTS CORPORATION

Current Principal Place of Business:

8016 NW 68TH STREET
MIAMI, FL 33166

New Principal Place of Business:

10800 NW 21ST STREET
250
MIAMI, FL 33172

Current Mailing Address:

8016 NW 68TH STREET
MIAMI, FL 33166

New Mailing Address:

10800 NW 21ST STREET
250
MIAMI, FL 33172

FEI Number: 65-1110911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODERNDORFER, LUIS E
2570 JARDIN WAY
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OBDERNDORFER, LUIS
Address: 2570 IARDIN WAY
City-St-Zip: WESTON, FL 33327

Title: VSTD () Delete
Name: OBERNDORFER, ANA C
Address: 2570 JARDIN WAY
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS OBERNDORFER

PRES

04/07/2005

Electronic Signature of Signing Officer or Director

_____ Date