

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098239

FILED
Apr 16, 2009
Secretary of State

Entity Name: EASY LIVING INVESTMENTS, INC.

Current Principal Place of Business:

2466 N W 100TH STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

2466 N W 100TH STREET
MIAMI, FL 33147

New Mailing Address:

FEI Number: 65-1147844 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARPER, NINA
2466 N W 100TH STREET
MIAMI, FL 33147 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: D () Delete
Name: HARPER, NINA
Address: 2466 N W 100TH STREET
City-St-Zip: MIAMI, FL 33147

Title: VP () Delete
Name: PULLEY, PRISTINE
Address: 1360 NW 177 TERR
City-St-Zip: OPA LOCKA, FL 33055

Title: T () Delete
Name: HOLLIDAY, DIETRICK
Address: 2466 NW 100 ST
City-St-Zip: MIAMI, FL 33147

Title: S () Delete
Name: STUBBS, DEREK
Address: 14575 17TH DR
City-St-Zip: MIAMI, FL 33167

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: PULLEY, PRISTINE
Address: 3260 NW 177 TERR
City-St-Zip: OPA LOCKA, FL 33055

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

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

Title: D () Change (X) Addition
Name: EASY LIVING INVESTMENT INC
Address: 2466 N W 100 STREET
City-St-Zip: MIAMI, FL 33147 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NINA HARPER

D

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date