

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116622

Entity Name: O & L INVESTMENTS, INC.

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

175 FOUNTAIBLEAU PARK BLVD.
SUITE 2L3
MIAMI, FL 33172

New Principal Place of Business:

1525 TREVINO AVE
CORAL GABLES, FL 33134

Current Mailing Address:

175 FOUNTAIBLEAU PARK BLVD.
SUITE 2L3
MIAMI, FL 33172

New Mailing Address:

P.O. BOX 557937
MIAMI, FL 332557937 US

FEI Number: 65-1159673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENTURA, MERCY
175 FOUNTAIBLEAU PARK BLVD.
SUITE 2L3
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

VENTURA, MERCY
1525 TREVINO AVE
CORAL GABLES, FL 33134 US

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: MERCY VENTURA

04/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLORES, ODALYS
Address: 175 FOUNTAIBLEAU PARK BLVD. SUIT 2L3
City-St-Zip: MIAMI, FL 33172

Title: P () Delete
Name: FLORES, LEONILA
Address: 175 FOUNTAIBLEAU PARK SUITE 2L3
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: FLORES, JUAN A
Address: 175 FOUNTAIBLEAU PARK BLVD. SUIT 2L3
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FLORES, ODALYS
Address: 1516 TREVINO AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: P (X) Change () Addition
Name: FLORES, LEONILA
Address: 1525 TREVINO AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: FLORES, JUAN A
Address: 1525 TREVINO AVE.
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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: ODALYS FLORES

D

04/09/2007

Electronic Signature of Signing Officer or Director

Date