2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000031813

Entity Name: FONSECA GROUP INVESTMENTS, INC.

FILED Mar 17, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|------------------------------------|
| Cullent Finicipal Flace Of Business. | New Fillicipal Flace Of Dusiliess. |

1923 SW 8 STREET MIAMI, FL 33134

Current Mailing Address: New Mailing Address:

1923 SW 8 STREET MIAMI, FL 33134

FEI Number: 04-3627172 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASNER, MARK M SUNTRUST INTERNATIONAL CENTER ONE SE 3 AVE, STE 2400

MIAMI, FL 33131 US

2211 COUNTRY CORAL GABLES, FL 33134 US

FONSECA, ZENAIDA

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: ZENAIDA FONSECA 03/17/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete FERNANDEZ, BELKYS Name: 1626 HULETT DRIVE Address: City-St-Zip: BRANDON, FL 33511

Title: () Delete FONSECA, LUIS Name: 5740 SW 47 STREET Address: MIAMI, FL 33155 City-St-Zip:

() Delete Title: GREGOIRE, CINTHIA Name: 1523 PALERMO AV Address: City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete

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

FONSECA, ZENAIDA Name: 2211 COUNTRY CLUB PRADO Address: City-St-Zip: CORAL GABLES, FL 33134 US

Title: (X) Change () Addition

FONSECA, LUIS Name: 5740 SW 47 STREET Address: MIAMI, FL 33155 US City-St-Zip:

Title: (X) Change () Addition

Name: GREGOIRE, CINTHIA 1523 PALERMO AV Address:

City-St-Zip: CORAL GABLES, FL 33134 US

Title: () Change (X) Addition

FERNANDEZ, BELKYS Name: Address: 10216 RAINBRIDGE DR City-St-Zip: RIVERVIEW, FL 33569 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.

Ρ SIGNATURE: ZENAIDA FONSECA 03/17/2009