

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032286

FILED
Apr 11, 2008
Secretary of State

Entity Name: BLUEFIRE INVESTMENTS INC.

Current Principal Place of Business:

1309 E BASE ST
MADISON, FL 32340

New Principal Place of Business:

1484 SE COOLIDGE TRL
LEE, FL 32059

Current Mailing Address:

P.O.BOX 548
LEE, FL 32059

New Mailing Address:

FEI Number: 04-3674182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBEN, JAMES S
1309 EAST BASE ST
MADISON, FL 32340 US

Name and Address of New Registered Agent:

HOLBEN, JAMES S
1484 SE COOLIDGE TRL
LEE, FL 32059 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:

04/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLBEN, JAMES S
Address: 1309 E BASE ST
City-St-Zip: MADISON, FL 32340

Title: M () Delete
Name: HOLBEN, SHANNON
Address: 1841 HOLLENBECK DR
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOLBEN, JAMES S
Address: 1484 SE COOLIDGE TRL
City-St-Zip: LEE, FL 32059

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

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: JAMES SPENCER HOLBEN

P

04/11/2008

Electronic Signature of Signing Officer or Director

Date