

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040293

Entity Name: BUSTA INVESTMENTS, INC.

FILED
May 02, 2006
Secretary of State

Current Principal Place of Business:

1365 SW ABINGDON AVENUE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

1618 SW LEXINGTON DRIVE
PORT ST. LUCIE, FL 34953

Current Mailing Address:

PO BOX 881088
PORT ST. LUCIE, FL 34988

New Mailing Address:

FEI Number: 75-3042537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'AMICO, GUY M
PO BOX 881088
PORT ST. LUCIE, FL 34988 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: D'AMICO, GUY M
Address: 1365 SW ABINGDON AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D () Delete
Name: MCGUIRE, DAVID
Address: 5610 CASSIA DRIVE
City-St-Zip: FORT PIERCE, FL 34982

Title: TD () Delete
Name: PITTMAN, LARRY
Address: 3915 NW CINNAMON CIRCLE
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD () Delete
Name: NUNES, VICTOR JR.
Address: 1514 SE MANTH LANE
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: D'AMICO, GUY M
Address: 1618 SW LEXINGTON DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34953

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

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 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: GUY D'AMICO

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date