


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000095948 1. Entity Name EQUILIBRIUM INVESTMENTS, INC.	
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Principal Place of Business 13454 SW 62 ST UNIT 0-106 MIAMI, FL 33183	Mailing Address 13454 SW 62 ST UNIT 0-106 MIAMI, FL 33183
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DO NOT WRITE IN THIS SPACE

05042005 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0641017	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BAILLY, JEAN-MARC 13454 S.W. 62 STREET UNIT 0-106 MIAMI, FL 33183	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS									
<table border="1"> <tr><td>TITLE</td><td>PTD</td></tr> <tr><td>NAME</td><td>BAILLY, JEAN M</td></tr> <tr><td>STREET ADDRESS</td><td>13454 SW 62 ST UNIT 0-106</td></tr> <tr><td>CITY-ST-ZIP</td><td>MIAMI, FL 33183</td></tr> </table>	TITLE	PTD	NAME	BAILLY, JEAN M	STREET ADDRESS	13454 SW 62 ST UNIT 0-106	CITY-ST-ZIP	MIAMI, FL 33183	<p align="right">000000377166 08/26/05-80003-002 150.00</p> <p align="center">DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Regis LARAQUE* **8/23/05 (35) 27-0737**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #