2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P02000118962

1. Entity Name

FLORIDA ONE INVESTMENT, INC.



Principal Place of Business

8900 SW 117 AVE STE 108-B MIAMI, FL 33186

Mailing Address

8900 SW 117 AVE STE 108-B

MIAMI, FL 33186

FILED Apr 28, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (10/03) 04232004

4. FEI Number 41-2074575

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAZCOS, PUBLIO F 8900 SW 117 AVE STE 108-B MIAMI, FL 33186

SIGNATURE: 1

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	Signature, typed or printed name of registered agont and title i	applicable (NOTE Registered	Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			0134240 00011_012_150_00
10.	OFFICERS AND DIREC	TORS		7 17 12/17/12/13	00021 010 100.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LAZCOS, PUBLIO F 8900 SW 117 AVE STE 108-B MIAMI, FL 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FERNANDEZ, HENRY F 8900 SW 117 AVE STE 108-B MIAMI, FL 33186		,	· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT W	RITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					

TORGED 125AA