

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020675

Entity Name: A I P INVESTMENT INC.

FILED  
Mar 13, 2008  
Secretary of State

**Current Principal Place of Business:**

7877 NW 165 TERR  
MIAMI, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

7877 NW 165 TERR  
MIAMI, FL 33016

**New Mailing Address:**

FEI Number: 27-0047175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOMIS, AMARILIS  
7877 NW 165 TERR  
MIAMI, FL 33016 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HERNANDEZ, PEDRO R  
Address: 7835 NW 166 TERR  
City-St-Zip: MIAMI, FL 33016

Title: D ( ) Delete  
Name: GOMIS, IVO SR  
Address: 7877 NW 165 TERR  
City-St-Zip: MIAMI, FL 33016

Title: D ( ) Delete  
Name: GOMIS, AMARILIS  
Address: 7877 NW 165 TERR  
City-St-Zip: MIAMI, FL 33016

Title: D ( ) Delete  
Name: HERNANDEZ, IVETT  
Address: 7869 NW 165 TERR  
City-St-Zip: MIAMI, FL 33016

Title: PD ( ) Delete  
Name: GOMIS, IVO JR  
Address: 3531 SW 99 CT  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: AMARILIS GOMIS

D

03/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date