


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P03000021833	
1. Entity Name LANDGAR INVESTMENTS INC.	

Principal Place of Business 8255 SW 5 STREET MIAMI, FL 33144	Mailing Address 8255 SW 5 STREET MIAMI, FL 33144
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01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 35-2200504	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

**GARCIA, ORLANDO
8255 SW 5 STREET
MIAMI, FL 33144**

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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  _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000749898 05/18/07-80040-020 .150.00
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10. OFFICERS AND DIRECTORS

TITLE PD	GARCIA, ORLANDO
NAME	
STREET ADDRESS	8255 SW 5 STREET
CITY-ST-ZIP	MIAMI, FL 33144
TITLE VD	GARCIA, SUSANA M
NAME	
STREET ADDRESS	8255 SW 5 STREET
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 without other like empowered.

SIGNATURE:  **4/23/07 305-710-0996**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #