## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # P03000025090

1. Entity Name

CITY INVESTMENT GROUP, INC.



**FILED** Feb 20, 2006 08:00 AN **Secretary of State** 

Principal Place of Business

3663 S.W. 8TH STREET

204-B MIAMI, FL 33135 . . Mailing Address

3663 S.W. 8TH STREET

204-B

MIAMI, FL 33135



## DO NOT WRITE IN THIS SPACE

02162006 No Chg-P CR2E034 (11/05)

4. FEI Number 45-0504130

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VAZQUEZ, GEORGE A 1121 ANDORA AVE CORAL GABLES, FL 33136

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prions of registered agent.	urpose of changing its registered	d office or i	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.						
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>	ing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			· · · · · · · · · · · · · · · · · · ·	
THILE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME	PD VAZQUEZ, GEORGE A 3663 SW 8TH STREET, SUITE 204B CORAL GABLES, FL 33134 VSTD ANLLO, CARLOS				U00000441477 03706-80038-807 150.00	
STREET ADDRESS CITY-ST-ZIP	3350 S.W. 129 AVENUE MIAMI, FL 33175	. <del>.</del>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
NAME STREET ADDRESS CITY-ST-7IP				IN .	THIS SPACE	

12. I hereby certify that the information supplied with this filling 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 effect 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> George A. Vazquez, President NAME OF SIGNING OFFICER OR DIRECTOR

02/16/2006

(305) 461-2475 Daylime Phone #