## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## **DOCUMENT # P03000059728** FILED 1. Entity Name DOLLARWISE INVESTMENTS, INC. MAR 15 PM 4: 33 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 8932 BRIARWOOD MEADOW LANE 8932 BRIARWOOD MEADOW LANE BOYNTON BEACH, FL 33437 BOYNTON BEACH, FL 33437 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 55-0834281 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Corporate Serv THOMAS, JOSE CPA Street Address (P.O. Box Number is Not Acceptable) 12839 NW 18 COURT PEMBROKE PINES, FL 33028 Highway Sunte AIA 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. 3/6/07 SIGNATURE (NOTE: Registered Agent signature required when reinstating) typed or printed 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. $\Box$ Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Change ■ Addition TITLE P/D NAIR. GOPINATHAN NAME NAME 8932 BRIARWOOD MEADOW LANE STREET ADDRESS STREET ADDRESS 600035338346 BOYNTON BEACH, FL 33437 CITY-ST-ZIP CITY-ST-ZIP V8 15 1T Addition TITLE ☐ Delete TITLE NAIR, JAYANANDAN NAME NAME STREET ADDRESS 11235 NARRAGANSETT BAY CT STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAIR, SUBHADRAMMA NAME NAME 11235 NARRAGANSETT BAY CT STREET ADDRESS STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition TITLE NAIR, SHYAMALA NAME NAME STREET ADDRESS 8932 BRIARWOOD MEADOW LANE STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 that every exempowered 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 anadgress, with all other like embowered. changed, or on an attachment with SIGNATURE: NING OFFICER OR DIRE