

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065132

FILED
Feb 06, 2005
Secretary of State

Entity Name: INFINITY INVESTMENT GROUP, CORP.

Current Principal Place of Business:

PO BOX 5251
DELTONA, FL 32728

New Principal Place of Business:

Current Mailing Address:

PO BOX 5251
DELTONA, FL 32728

New Mailing Address:

FEI Number: 56-2368489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, AWILDA
1545 BRAYTON CIR
DELTONA, FL 32725 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: P () Delete
Name: FERNANDEZ, RAUL
Address: 1545 BRAYTON CIRCLE
City-St-Zip: DELTONA, FL 32725

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P.T (X) Change () Addition
Name: FERNANDEZ, RAUL O
Address: P.O BOX 5251
City-St-Zip: DELTONA, FL 32728

Title: V.S () Change (X) Addition
Name: FERNANDEZ, AWILDA
Address: P.O BOX 5251
City-St-Zip: DELTONA, FL 32728

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAUL FERNANDEZ

V T

02/06/2005

Electronic Signature of Signing Officer or Director

_____ Date