

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065132

FILED
May 07, 2007
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:

827 DELTONA BLVD.
B
DELTONA, FL 32728

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:

FERNANDEZ, AWILDA
827 DELTONA BLVD.
B
DELTONA, FL 32725 US

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: RAUL O FERNANDEZ

05/07/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAUL O FERNANDEZ

P

05/07/2007

Electronic Signature of Signing Officer or Director

Date