

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109191

Entity Name: FLORE INVEST, INC.

FILED  
Jan 14, 2008  
Secretary of State

## Current Principal Place of Business:

201 GOLDEN BEACH DRIVE  
GOLDEN BEACH, FL 33160

## Current Mailing Address:

201 GOLDEN BEACH DRIVE  
GOLDEN BEACH, FL 33160

## New Principal Place of Business:

20900 NE 30TH AVENUE  
UNIT#311  
AVENTURA, FL 33180

## New Mailing Address:

20900 NE 30TH AVENUE  
UNIT#311  
AVENTURA, FL 33180

FEI Number: 20-0998232

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ESJ ASSET MANAGEMENT  
201 GOLDEN BEACH DRIVE  
GOLDEN BEACH, FL 33160 US

## Name and Address of New Registered Agent:

ESJ ASSET MANAGEMENT  
20900 NE 30TH AVENUE  
UNIT#311  
AVENTURA, FL 33180 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: ARNAUD SITBON

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SITBON, ARNAUD  
Address: 9201 COLLINS AVENUE, APT#822  
City-St-Zip: SURFSIDE, FL 33154

Title: DP (X) Delete  
Name: SITBON, ARNAUD  
Address: 9201 COLLINS AVENUE, APT#822  
City-St-Zip: SURFSIDE, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SITBON, ARNAUD  
Address: 9701 WEST BROADVIEW DRIVE  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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: ARNAUD SITBON

D

01/14/2008

Electronic Signature of Signing Officer or Director

Date