2006 FOR PROFIT CORPORATION ANNUAL REPORT

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Mar 03, 2006 8:00 am
Secretary of State
03-03-2006 90111 006 ***158.75

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1. Entity Name
ADDLEA INVESTMENT, INC.

Principal Place of Business	Mailing Address
16212 S.W. 23RD STREET MIRAMAR, FL 33027	~~16212 S.W. 23RD STREET~~ ~~MIRAMAR, FL 33027~~ 1101 SW 189 AVE PEMBROKE PINES FL 33029

DO NOT WRITE IN THIS SPACE

02172006 No Chg-P CR2E034 (11/05)

4. FEI Number
57-1194006

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHVIMMER, THEODORE A ESQ
7400 WILES ROAD SUITE 101
CORAL SPRINGS, FL 33067

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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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BENJAMIN, ADDISSON A
STREET ADDRESS	17188 MURCOTT BLVD.
CITY-ST-ZIP	LOXAHATCHEE, FL 33470
TITLE	VSD
NAME	BENJAMIN, LLEANA
STREET ADDRESS	~~16212 SW 23RD STREET~~ 1101 SW 189 AVE
CITY-ST-ZIP	~~MIRAMAR, FL 33027~~ PEMBROKE PINES FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby 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 trustee empowered 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 an address, with all other like empowered.

SIGNATURE: (ADDISON A. BENJAMIN) PRESIDENT 02-17-2006 561 ~~954~~ 790 9368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #