2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029289

Title:

Name:

Address:

City-St-Zip:

() Delete

FILED Apr 19, 2005 Secretary of State

Entity Name: NEW HORIZON INVESTMENT GROUP, INC	
Current Principal Place of Business:	New Principal Place of Business:
16749 NW 13 COURT PEMBROKE PINES, FL 33028	
Current Mailing Address:	New Mailing Address:
16749 NW 13 COURT PEMBROKE PINES, FL 33028	
FEI Number: 20-0721759 FEI Number Applied For () FEI Num	nber Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MORIYON, LUIS E 16749 NW 13 COURT PEMBROKE PINES, FL 33028 US The above named entity submits this statement for the purpose o in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$
Title: P () Delete Name: MORIYON, LUIS E Address: 16749 NW 13 COURT City-St-Zip: PEMBROKE PINES, FL 33028	Title: P (X) Change () Addition Name: MORIYON, LUIS E PRESIDE Address: 16749 NW 13 COURT City-St-Zip: PEMBROKE PINES, FL 33028
Title: () Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: CONEJEROS, MANUEL H VICE-PR Address: 1440 BRIDFORD PARKWAY APT J City-St-Zip: GREENSBORO, NC 27407

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LUIS E. MORIYON PRES 04/19/2005

() Change (X) Addition

HIDALGO, AUBERTO TREASUR

PEMBROKE PINES, FL 33029

17901 NW 5TH STREET., SUITE 101