## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036889

Entity Name: ORION INVESTMENTS OF AMERICA CORP

FILED Apr 11, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess.

10720 CARIBBEAN BOULEVARD 15020 SW 156 AVENUE MIAMI, FL 33196 SUITE 435

MIAMI, FL 33189

**Current Mailing Address: New Mailing Address:** 

10720 CARIBBEAN BOULEVARD 15020 SW 156 AVENUE MIAMI, FL 33196

SUITE 435 MIAMI, FL 33189

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARRERO, JULIO C THE GENTILE GROUP, LLC 10720 CARÍBBEAN BOULEVARD 15020 SW 156 AVENUÉ SUITE 435 MIAMI, FL 33196 MIAMI, FL 33189 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: JUAN CARLOS RIVERA 04/11/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Delete Title: () Change () Addition

MONTERROSA, CLAUDIA Name: Name:

10720 CARIBBEAN BOULEVARD SUITE 435 Address: Address: City-St-Zip: MIAMI, FL 33189 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

ANTURI, FABIOLA E Name: Name: ANTURI, FABIOLA E 10720 CARIBBEAN BOULEVARD SUITE 435 Address: 15020 SW 156 AVENUE Address: MIAMI, FL 33189 MIAMI, FL 33196 City-St-Zip: City-St-Zip:

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 Statutés. 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.

Ρ SIGNATURE: FABIOLA ANTURI 04/11/2005