

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000054621

Entity Name: ANGELA INVESTMENTS, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

12368 SW 10 ST
PEMBROKE PINES, FL 33025

New Principal Place of Business:

12354 NW 14 ST
PEMBROKE PINES, FL 33026

Current Mailing Address:

P.O. BOX 260056
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 20-1040300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTAMIMI, O.I.
12368 SW 10 ST
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

ALTAMIMI, O.I.
12354 NW 14 ST
PEMBROKE PINES, FL 33026 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: ALTAMIMI, O.I.
Address: 12368 SW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33025

Title: DV () Delete
Name: AHMAD, I S
Address: 12368 SW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: ALTAMIMI, O.I.
Address: 12354 NW 14 ST
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DV (X) Change () Addition
Name: AHMAD, I S
Address: 12354 NW 14 ST
City-St-Zip: PEMBROKE PINES, FL 33026

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: O. I. ALTAMIMI

DPS

05/01/2008

Electronic Signature of Signing Officer or Director

Date