2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000117669

1. Entity Name
LIVIA INVESTMENTS, INC.

Principal Place of Business	Mailing Address
411 SOUTHWEST 88TH COURT MIAMI, FL 33174 US	411 SOUTHWEST 88TH COURT MIAMI, FL 33174 US

DO NOT WRITE IN THIS SPACE

01072007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-1487805	Not Applicable

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

6. **Name and Address of Current Registered Agent**

MALDONADO, ALBERTO E
411 SW 88TH CT.
MIAMI, FL 33174

DO NOT WRITE
IN THIS SPACE

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 _____

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

1-8-2007
DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

U00000582850
01/11/07-80048-008 150.00

10.   OFFICERS AND DIRECTORS

TITLE	DPS
NAME	MALDONADO, ALBERTO E
STREET ADDRESS	411 SW 88TH CT.
CITY-ST-ZIP	MIAMI, FL 33174

TITLE	DV
NAME	MALDONADO, LIVIA F
STREET ADDRESS	411 SW 88TH CT.
CITY-ST-ZIP	MIAMI, FL 33174

TITLE	T
NAME	MALDONADO, LESLY M
STREET ADDRESS	472 SW 87TH PL
CITY-ST-ZIP	MIAMI, FL 33174

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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: _____   *1-8-2007*   *305-223-2156*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #