

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 18, 2005 8:00 am**  
**Secretary of State**

08-18-2005 90004 002 \*\*\*150.00

**DOCUMENT # P04000117738**  
 1. Entity Name  
 URSA INVESTMENT, INC.



Principal Place of Business: 168 S.E. 1ST STREET, SUITE 1006, MIAMI, FL 33131  
 Mailing Address: 168 S.E. 1ST STREET, SUITE 1006, MIAMI, FL 33131

**50062320**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country



08152005 Chg-P CR2E034 (10/03)

4. FEI Number: **20-1486023**  
 Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent

CHAPA, OSCAR  
 168 S. E. 1ST STREET  
 SUITE 1006  
 MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE: P, D  
 NAME: URIBE, SAUL  Delete  
 STREET ADDRESS: 168 S.E. 1ST STREET  
 CITY-ST-ZIP: MIAMI, FL 33131

TITLE: S, D  
 NAME: URIBE, SAUL  Delete  
 STREET ADDRESS: 168 S.E. 1ST STREET  
 CITY-ST-ZIP: MIAMI, FL 33131

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Saul Uribe 8/15/05 205-317-9043  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT  
50062320

URSA INVESTMENT, INC.

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168 S.E. 1<sup>st</sup> Street  
Suite 1006  
Miami, FL 33131

8/15/2005

Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

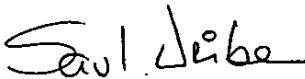
RE: URSA Investment, Inc.  
Doc #P04000117738  
FEI # 20-1486323

Dear Sir/Madam:

This is to inform you that we had not received the annual report form year 2005 due to the fact that you have the wrong address in your records, please waive the fees since I assumed my report was filed on time.

These instructions were given to me by phone today by: Mr. Michelle Milligan please find enclosed the report and check for the year 2005 for the amount of \$150.00

Sincerely,



Saul Uribe  
President