2007 FOR PROFIT CORPORATION ANNUAL REPORT

A	NNUAL REPORT	FILFD	FILED		
DOCUMENT # P05000061200 1. Entity Name					
ENE-ENE INVESTMENT, CORP.			07 FEB 22 AM 9: 30		
		(C. 1)	SECHETARY OF ST TALLAHASSFE, FLO	ATE	
Principal Place of Business 1200 BRICKELL AVENUE	Mailing Address 1200 BRICKELL AVEN	UE		INDA	
SUITE 860 MIAMI, FL 33131 US	SUITE 860 Miami, Fl 33131	us			
2. Principal Place of Business - No					
				- - -	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		02132007 Chg-P CR2E034 (12)	06) 0 /	
City & State	City & State		4. FEI Number 20-2946120		
Zip Countr	ry Zip	Country	5. Certificate of Status Desired	Additional quired	
6. Name and Add	iress of Current Registered Agent	Name	7. Name and Address of New Registered Agent		
LOPEZ, PETER M ESQ			Keter M. CORZ		
1200 BRICKELL AVENUE SUITE 860 (1)		Street Ac	Street Address (P.O. Box Number is Not Acceptable) 1911 NW 150 AVE, STE 201		
MIAMI, FL 33131	20	City	0	Coda	
8. The above named entity submits his statement for the purpose of changing its register		<u>1</u>	City Pembroke Pines FL Zip Code 330-8 ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
the obligations of registered age		o registered emos or	registered agont, or both, in the diale of Florida. Familiarina	with and decept	
SIGNATURESignature, typed or prigted/ha	ample registered agent and title it applicable. (NO	TE: Registered Agent signatu	re required when reinstating) DATE		
	9. Election Campa	sìon Financina	\$5.00 · · ·		
FILE NOW!!! FEE'18 After May 1, 2007 Fee v	3 4 1 3 6 1 0 1		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIREC		
NAME NAFFAH, AMAD	☐ Delete	TITLE NAME	□ Ch	ange 🔲 Addition	
STREET ADDRESS 1200 BRICKELL A	AVENUE SUITE 860	STREET ADDRESS CITY-ST-ZIP		!	
TITLE D	☐ Delete	TITLE		ange Addition	
		name Street address	900089281619 02/27/0701001013 **400,00		
CITY-ST-ZIP MIAMI, FL 33131		CITY-ST-ZIP			
NAME	L. Delete	TITLE NAME	Ch	ange	
STREET ADDRESS (STREET ADDRESS CHY-ST-ZIP			
TITLE	☐ Delete	TITLE	Ch	ange 🔲 Addition	
NAME STREET ADDRESS		NAME STREET ADDRESS			
CITY-ST-ZIP		CITY-SI-ZIP		ann D Addition	
NAME	Delete	TITLE NAME		ange Addition	
STREET ADORESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP			
IIILE	☐ Delete	TITLE	Cr	nange Addition	
NAME STREET ADDRESS		NAME STREET ADDRESS			
CITY-ST-ZIP	ating growth all with this file-school and the set	CITY-ST-ZIP	applied in Chapter 110 Florida Courtes Libration - 17 the	the inference	
indicated on this report or support of the corporation or the received	plemental report is true and accurate and that ver or trustee empowered to execute this repo	t my signature shall h ort as required by Cha	ontained in Chapter 119, Florida Statutes. I further certify that ave the same legal effect as it made under oath; that I am an e apter 607, Florida Statutes; and that my name appears in Block	officer or director	
like	With an address, with all other like empowere	d.	ila da	:	
SIGNATURE: ASSIGNATION	TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	Date 2/17/07 Date Dayline P	hane M	