
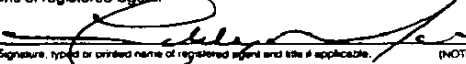



FILED  
Apr 16, 2007 8:00 am  
Secretary of State

04-02-2007 90054 045 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P05000122313</b> 1. Entity Name <b>WATERMEN INVESTMENTS, INC.</b>			
Principal Place of Business <b>8045 NW 155 STREET MIAMI LAKES, FL 33016</b>		Mailing Address <b>8045 NW 155 STREET MIAMI LAKES, FL 33016</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
		02082007 No Chg-P CR2E034 (11/05)	
		4. FEI Number <b>20-3578370</b>	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GARCIA, EDDY 8045 NW 155 STREET MIAMI LAKES, FL 33016</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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  <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE <b>3/20/07</b>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<b>DO NOT WRITE IN THIS SPACE</b>	
P <b>GARCIA, EDDY 8045 NW 155 STREET MIAMI LAKES, FL 33016</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
V <b>KRAIZGRUN, DAVID 8045 NW 155 STREET MIAMI LAKES, FL 33016</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>3/19/07</b> Daytime Phone <b>305-828-0103</b>	