


**FILED**  
**May 07, 2007 8:00 am**  
**Secretary of State**

05-07-2007 90065 037 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

**DOCUMENT # P05000122351**

1. Entity Name  
 CHACIED INVESTMENT, INC.



Principal Place of Business  
 10700 NW 66 STREET #308  
 MIAMI, FL 33178

Mailing Address  
 10700 NW 66 STREET #308  
 MIAMI, FL 33178

**DO NOT WRITE IN THIS SPACE**

4010



04162007 No Chg-P CR2E034 (11/05)

4. FEI Number 54-2184466	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRATO, CIRO A P  
 10700 NW 66 STREET #308  
 MIAMI, FL 33178

**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: *Ciro Prato* DATE: *4-20-07*

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

**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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PRATO, CIRO A P
STREET ADDRESS	10700 NW 66 STREET #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	VD
NAME	PRATO DE DE PABLOS, ISABEL
STREET ADDRESS	10700 NW 66 STREET #308
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	STD
NAME	DE PABLOS, EDGAR
STREET ADDRESS	10700 NW 66 STREET #308
CITY-ST-ZIP	MIAMI, FL 33178
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: *Ciro Prato* Date: *4-20-07* Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR