

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

03-20-2007 90019 036 ***150.00

DOCUMENT # P06000071868							
1. Entity Name DAVID & SONS INVESTMENT CORPORATION							
Principal Place of Business 1185 98TH STREET STE 8 MIAMI, FL 33154			Mailing Address 1185 98TH STREET STE 8 MIAMI, FL 33154				
2. Principal Place of Business - No P.O. Box # 1185 98th street		3. Mailing Address 1185 98th street					
Suite, Apt. #, etc. Apt 8		Suite, Apt. #, etc. Apt 8					
City & State Miami, FL		City & State Miami, FL					
Zip 33154		Country U.S.A					
4. FEI Number 204931767		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 SERNA, JUAN D 1185 98TH STREET STE 8 MIAMI, FL 33154		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City					
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 _____							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE P	NAME SERNA, JUAN D		<input type="checkbox"/> Delete	TITLE	NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1185 98TH STREET STE 8	CITY - ST - ZIP MIAMI, FL 33154			STREET ADDRESS	CITY - ST - ZIP		
TITLE	NAME		<input type="checkbox"/> Delete	TITLE	NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY - ST - ZIP			STREET ADDRESS	CITY - ST - ZIP		
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STREET ADDRESS	CITY - ST - ZIP			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 another who is empowered.							
SIGNATURE: _____				03/13/2007			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>			