

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088899

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: LER INVESTMENT GROUP, INC.

**Current Principal Place of Business:**

13605 S DIXIE HIGHWAY  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

13605 S DIXIE HIGHWAY  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 20-5139111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROMERO, LARRY  
1938 S.E. 23 TERRACE  
HOMESTEAD, FL 33035 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROMERO, LARRY  
Address: 1938 S.E. 23 TERRACE  
City-St-Zip: HOMESTEAD, FL 33035

Title: VP ( ) Delete  
Name: ROMERO, ELSY  
Address: 934 S.W. 148 PLACE  
City-St-Zip: MIAMI, FL 33194

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY ROMERO

PRES

04/20/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date