2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 26, 2007 8:00 am Secretary of State 02-26-2007 90064 026 ***150.00

1. Entity Na	IMENT # P0600012 VESTMENTS, INC.	7894				
Principal Place of Business 2011 NORTHWEST 88TH TERRACE PEMBROKE PINES, FL 33024		Mailing Address 2011 NORTHWEST 88TH TERRACE PEMBROKE PINES, FL 33024		 ,	40024151	1)1
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01242007 Chg-P CR2E034 (12/06)	
City & State		City & State			4. FEI Number Applied F 20-5690163 Not Appli	
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent	Name	<u>-</u>	7. Name and Address of New Registered Agent	
NASH, BARBARA 2011 NORTHWEST 88TH TERRACE PEMBROKE PINES, FL 33024			Street	Street Address (P.O. Box Number is Not Acceptable)		
			City		FL Zip Code	
		or the purpose of changing its	s registered office o	or register	red agent, or both, in the State of Florida. I am familiar with, and ac	cept
_	tions of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agen	t and tide if Spplicable. (NOT	E: Registered Agent signs	ture required	d when reinstating) DATE .	•
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	9. Election Campa Trust Fund Cont		\$5.1 Adde	.00 May Be led to Fees	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME	D EIRIZ,JR., RAMIRO	☐ Celete	TITLE NAME		adiawt/Dirantor ☐ Change	illion
STREET ADDRESS CITY-ST-ZIP	2011 NORTHWEST 88TH TERR PEMBROKE PINES, FL 33024	ACE	STREET ADDRESS CITY-ST-ZIP		iz, Jr., Ramiro 1 NW 88 Terrace broke Pines, FL 33024	
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STREET ADDRESS CITY-SI-ZIP			NAME STREET ADDRESS CITY-ST-ZIP			
TITLE .		☐ Delete	TITLE		☐ Change ☐ Add	ilion
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
indicated of the com	on this report or supplemental report is	true and accurate and that movered to execute this report a	iv signature shall h	ave me sa	in Chapter 119, Florida Statutes, I further certify that the informatio ame legal effect as if made under outh; that I am an officer or direct. Florida Statutes; and that my name appears in Block 10 or Block 1	or
SIGNAT	URE: Ramiro Eiriz,	Jr. President		<u> </u>	2/1/2007 954-651-4338 Date Despire Phone #	_
	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER C	OR DIRECTOR		Date Daytime Phone #	