

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081899

Entity Name: PLP INVESTMENT GROUP, INC.

FILED  
May 18, 2009  
Secretary of State

## Current Principal Place of Business:

7325 NW 79TH TERR  
MEDLEY, FL 33166

## New Principal Place of Business:

6055 NW 87TH AVE.  
DORAL, FL 33178

## Current Mailing Address:

7325 NW 79TH TERR  
MEDLEY, FL 33166

## New Mailing Address:

6055 NW 87TH AVE.  
DORAL, FL 33178

FEI Number: 26-0549089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALAGON, JOSE M JR  
7325 NW 79TH TERR  
MEDLEY, FL 33166 US

## Name and Address of New Registered Agent:

MLP FINANCIAL GROUP, INC.  
4005 NW 114TH AVE.  
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DORAL, FL 33178 US

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: SALVADOR DIPP

05/18/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MALAGON, JOSE M JR  
Address: 7325 NW 79TH TERR  
City-St-Zip: MEDLEY, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SMITH, DERRICK  
Address: 6055 NW 87TH AVE  
City-St-Zip: DORAL, FL 33178

Title: VPSD ( ) Change (X) Addition  
Name: MALAGON, JOSE M JR  
Address: 7330 NW 114TH AVE., APT. 108  
City-St-Zip: DORAL, FL 33178

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: DERRICK SMITH

PD

05/18/2009

Electronic Signature of Signing Officer or Director

Date