


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90033 015 ***158.75

DOCUMENT # P25934 1. Entity Name DRIZOS INVESTMENTS, INC.					
Principal Place of Business 560 BROADWAY ST LONGBOAT KEY, FL 34228			Mailing Address 8724 SR 70 EAST # 177 BRADENTON, FL 34202		
2. Principal Place of Business - No P.O. Box # 4040 Verna Bethany Rd		3. Mailing Address Suite, Apt. #, etc.			
City & State Myakka City, FL		City & State		4. FEI Number 84-0940766	
Zip 34251		Country Manatee		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DRIZOS, NICHOLAS G. 560 BROADWAY ST LONGBOAT KEY, FL 34228				7. Name and Address of New Registered Agent Name Drizos, Nicholas G. Street Address (P.O. Box Number is Not Acceptable) 4040 Verna Bethany Rd City Myakka City FL 34251	
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 Nicholas G. Drizos Michael G. Lugo 1-17-2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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 NAME STREET ADDRESS CITY-ST-ZIP	P DRIZOS, NICHOLAS G 560 BROADWAY ST LONGBOAT KEY, FL 34228	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DRIZOS, NICHOLAS G. 4040 Verna Bethany Rd. MYAKKA CITY, FL- 34251	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DRIZOS, NICHOLAS G. 4040 Verna Bethany Rd MYAKKA CITY, FL 34251	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
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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: Nicholas G. Drizos		1-17-2008 941-780-0928			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>			