


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2007 08:00 A
Secretary of State

DOCUMENT # P93000072674 1. Entity Name C.I.A. INVESTMENT CORPORATION		
Principal Place of Business 430 S. CONGRESS AVENUE SUITE 1 DELRAY BEACH, FL 33445 US	Mailing Address 430 S. CONGRESS AVENUE SUITE 1 DELRAY BEACH, FL 33445 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SUCHER, MICHAEL 430 S. CONGRESS AVENUE, SUITE 1 DELRAY BEACH, FL 33445		DO NOT WRITE IN THIS SPACE
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 <u><i>Michael Sucher</i></u> (NOTE: Registered Agent signature required when reinstating) DATE <u>Apr 9 2007</u>		
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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SUCHER, MICHAEL 430 S. CONGRESS AVENUE, SUITE 1 DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SUCHER, BRIAN 430 S. CONGRESS AVENUE, SUITE 1 DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SUCHER, PHYLLIS 430 S. CONGRESS AVENUE, SUITE 1 DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SUCHER, ANNA 430 S CONGRESS AVE STE1 DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME 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 all other like empowered.		
SIGNATURE: <u><i>Michael Sucher</i></u> <u>Apr 9, 2007</u> (561) 265-4500 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0445437 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

U000000697130
04/18/07-80028-003 150.00

**DO NOT WRITE
IN THIS SPACE**