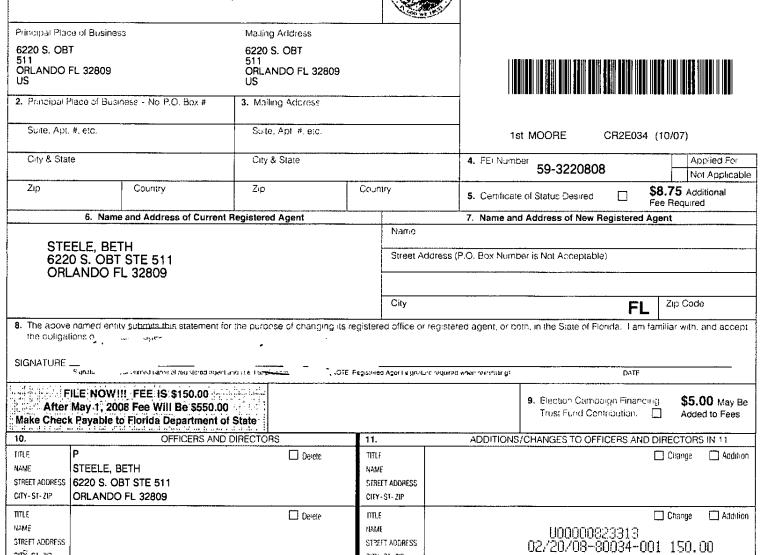
2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT (AR)**

## DOCUMENT # P94000011383

1. Entity Name

## FLORIDA INVESTMENTS UNLIMITED, INC.



CITY-ST-7PP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 appear of the corporation of the receiver or trustee empowered.

SIGNATURE:

CITY-SI-ZI?

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-21P

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**FILED** 

Feb 11, 2008 08:00 Al Secretary of State