FILED
Apr 11, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000024669

1. Entity Name
PROPER INVESTMENT, INC.

Principal Place of Business	Mailing Address
3570 NW 135 ST OPA LOCKA, FL 33054	3570 NW 135 ST OPA LOCKA, FL 33054

02:72006 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0574191
☐ Applied For
☐ Not Applicable

5. Certificate of Status Ordered ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOTHARIUS, RICHARD
7700 N. KENDALL DR.
SUITE 304
MIAMI, FL 33143

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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: _____ U00000289839
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required by law.) 04/11/05-80084-011 150.00

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Florida Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PARKER, STEVEN
STREET ADDRESS	3570 NW 135 ST
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	VD
NAME	PARKER, MARIELLA
STREET ADDRESS	3570 NW 135 ST
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 4/8/05
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date