

FILED
May 15, 2008 8:00 am
Secretary of State

05-15-2008 90028 009 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000072604
 1. Entity Name
 MILLION DOLLAR INVESTMENT, CORP.



DO NOT WRITE IN THIS SPACE

0102792

2. Principal Place of Business
 16170 SW 16th ST
 Suite, Apt. #, etc.

3. Mailing Address
 16170 SW 16th ST
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 PEMBROKE PINES, FL

City & State
 PEMBROKE PINES, FL

Zip 33027 Country USA Zip 33027 Country USA

4. FEI Number 65-0613927 Applied For Not Applicable

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

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7. Name and Address of Current Registered Agent

Name ANTHONY MORA

Street Address (P.O. Box Number is Not Acceptable)
 16170 SW 16th ST

City PEMBROKE PINES FL Zip Code

6. 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 _____ DATE _____
Signature, typed or printed name of registered agent and if applicable, (NOTE: Registered Agent's signature required when re-registering)

8. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANTHONY MORA
STREET ADDRESS	16170 SW 16th ST.
CITY-STATE-ZIP	PEMBROKE PINES, FL 33027
TITLE	S
NAME	MAGGIE MORA
STREET ADDRESS	16170 SW 16th ST
CITY-STATE-ZIP	PEMBROKE PINES, FL 33027
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-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 007, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Maggie Mora 4/24/08 305-772-5762
SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING OFFICER OR DIRECTOR Date Day/Phone #

CR2E034B (12/02)