


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000094875	
1. Entity Name I & P INVESTMENTS, INC.	

Principal Place of Business 110 N.W. 27TH AVENUE MIAMI, FL 33125	Mailing Address P.O. BOX 144036 CORAL GABLES, FL 33114
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04212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0638253	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PADRON, CARLOS E ESQ 3191 CORAL WAY #1005 MIAMI, FL 33145

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000528068 05/05/06-80020-021 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, PEDRO 110 N.W. 27TH AVENUE MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GONZALEZ, ISABEL 110 N.W. 27TH AVENUE MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GONZALEZ, JONATHAN 110 N.W. 27TH AVENUE MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GONZALEZ, JANELLA E 727 E DICIDI DR. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: <i>Pedro Gonzalez, Pres.</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: <i>4/21/06</i> Daytime Phone #: <i>305 644-1911</i>