


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000023319 1. Entity Name F & L INVESTMENTS, INC.		
Principal Place of Business 6617 GLENCOE DR. TEMPLE TERRACE, FL 33617	Mailing Address 6617 GLENCOE DR. TEMPLE TERRACE, FL 33617	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent VALENTI, DANIA 6617 GLENCOE DR. TAMPA, FL 33617		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>
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	000000671166 03/28/07-80019-005 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACKSON, FRANCES 511 ROYAL GREENS DR TEMPLE TERRACE, FL 33617	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARCIA, FRANK J 6610 HEATHERTON CT TEMPLE TERRACE, FL 33617	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PINIELLA, ANITA 1005 TARAY DE AVILA TAMPA, FL 33613	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VALENTI, DANIA 6617 GLENCOE DR TEMPLE TERRACE, FL 33617	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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>Dania F. Valenti</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		

Date

Daytime Phone #