2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000005355

Entity Name: C.F.E. INVESTMENT CORP.

FILED Mar 24, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

8085 NW 155TH ST 8085 NW 155TH ST

MIAMI, FL 33016 MIAMI LAKES, FL 33016 US

Current Mailing Address: New Mailing Address:

8085 NW 155TH ST 8085 NW 155TH ST

MIAMI, FL 33016 MIAMI LAKES, FL 33016 US

FEI Number: 65-0741170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

COHEN, STUART COHEN, STUART 8085 NW 155TH ST 8085 NW 155TH ST

MIAMI LAKES, FL 33016 MIAMI, FL 33016 US

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.

SIGNATURE: 03/24/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition

Title: COHEN, STUART COHEN, STUART Name: Name: 8085 NW 155 ST 8085 NW 155 ST Address: Address: City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI LAKES, FL 33016

Title: STD Title: STD () Delete (X) Change () Addition FREEDMAN, LAWRENCE B Name: FREEDMAN, LAWRENCE B Name:

8085 NW 155 ST 8085 NW 155 ST Address: Address: MIAMI, FL 33016 MIAMI LAKES, FL 33016 City-St-Zip: City-St-Zip:

Title: Title: VD VD

() Delete (X) Change () Addition ENCINOSA, GUILLERMO J Name: ENCINOSA, GUILLERMO J Name:

8085 NW 155 ST 8085 NW 155 ST Address: Address: City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STUART COHEN PD 03/24/2009