2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000104166

Address:

City-St-Zip:

PO BOX 141891

CORAL GABLES, FL 33114

FILED Jul 24, 2007 Secretary of State

Entity Nan	ne: MSV INVE	STMENTS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PO BOX 141891 MAMI, FL 33114 US		100 LINCOLN RD 823 MIAMI BEACH, FL 33		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 14 MIAMI, FL					
FEI Number:	65-0906609	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SOSA, MAGALI 804 DOUGLAS RD SUITE 375 MIAMI, FL 33134 US			SOSA, MAGALI 300 SEVILLA AVENUE 309 MIAMI, FL 33134 US	300 SÉVILLA AVENUE 309	
The above in the State		ubmits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: MAGALI SOSA				07/24/2007	
	Electroni	c Signature of Registered Age	nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SOSA, MAGALI PO BOX 141891 CORAL GABLES		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SOSA, NELSON PO BOX 141891 MIAMI, FL 3311		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () VALLADARES. N	Delete //AGALI	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MAGALI SOSA D 07/24/2007