

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010939

Entity Name: LIBVEN INVESTMENT, CORP.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

5757 COLLINS AVE.,#1205
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5757 COLLINS AVE.,#1205
MIAMI BEACH, FL 33140

New Mailing Address:

848 BRICKELL KEY DRIVE # 3701
MIAMI, FL 33131

FEI Number: 65-0987375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAZZA-MARTINEZ, TANIA A
782 NW LE JEUNE RD.,STE.638
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

MAZZA-MARTINEZ, TANIA A
9130 S. DADELAND BLVD. # 1600
MIAMI, FL 33156 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:

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RACHO KURI, ANTONIO MR.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: DE RACHO, SUSANA MRS.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: RACHO MIGUEL, JAMIL MR.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: RACHO MIGUEL, JORGE MR.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: RACHO MIGUEL, ELIAS A MR.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: RACHO MIGUEL, SUSANA M MRS.
Address: 5757 COLLINS AVE.,#1205
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSANA M. RACHO MIGUEL

D

04/18/2006

Electronic Signature of Signing Officer or Director

Date