

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000068162	
1. Entity Name BOULEVARD INVESTMENTS, INC.	



Principal Place of Business 427 E SAN MARINO DRIVE SAN MARINO ISLAND MIAMI BEACH, FL 33139	Mailing Address 427 E SAN MARINO DRIVE SAN MARINO ISLAND MIAMI BEACH, FL 33139
---	---



03162005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0943852	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LITMAN, NEAL S ESQ GROVE PLAZA - SECOND FLOOR 2900 SW 28TH TERRACE COCONUT GROVE, FL 33133
--

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, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DOMINGUEZ, LUIS O 427 E SAN MARINO DRIVE, SAN MARINE ISLAND MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DOMINGUEZ, MARITZA 427 E SAN MARINO DRIVE, SAN MARINE ISLAND MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000289082
04/06/05-80012-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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>Luis O. Dominguez</i>	DATE: <i>4/4/2005</i> DAYTIME PHONE: <i>305-534-0244</i>