## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # S68568

1. Entity Name

KISLAK LIMITED INVESTMENTS, INC.



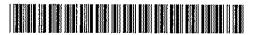
FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

7900 MIAMI LAKES DRIVE WEST HIALEAH, FL 33016

7900 MIAMI LAKES DRIVE WEST HIALEAH, FL 33016



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Applied For 4. FEI Number 65-0276947 Not Applicable

5. Certificate of Status Desired

04242006

\$8.75 Additional Fee Required

CR2E034 (11/05)

RODRIGUEZ, CHRISTY

7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL

## DO NOT WRITE IN THIS SPACE

No Chg-P

8. The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its regist	ered office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Regist	ered Agent signaturi	required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Fir Trust Fund Contributio		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KISLAK, JAY I 7900 MIAMI LAKES DR W MIAMI LAKES, FL 33016			U00000546128 05/11/06-80103-012 150.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT BARTELMO, THOMAS 7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016				
TITLE NAME STREET ADDRESS GITY-ST-ZIP	VP LUBOW, CHERYL 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS RODRIGUEZ, CHRISTY 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016				
NTLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRAUN, STEPHEN 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016				<del>-</del> - · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the Information supplied with this filling 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 attach

SIGNATURE:

OFFICER OR DIRECTOR