## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

City-St-Zip:

DORAL, FL 33122

FILED Mar 19, 2009

DOCUMENT# S/813/				Secretary of State	
Entity Na	me: SHUSHO	) INVESTMENT, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7811 NW : DORAL, F	34 STREET L 33122				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
7811 NW : DORAL, F	34 STREET L 33122				
FEI Number	: 65-0415606	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ROSADO, CARLOS 7811 NW 34 STREET DORAL, FL 33122 US			2121 PONCE DE LEC SUITE 1050	CONSULTING SERVICES OF SOUTH FLORIDA INC. 2121 PONCE DE LEON BLVD SUITE 1050 CORAL GABLES, FL 33134 US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: ANTONIO GARCIA				03/19/2009	
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( XACUR, NICOI 7811 NW 34 S DORAL, FL 33	TREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( XACUR, JUAN 7811 NW 34 S DORAL, FL 33	TREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	VP ( ROSADO, CAF 7811 NW 34 S		Title: Name: Address:	( ) 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.

City-St-Zip:

SIGNATURE: CARLOS A. ROSADO VΡ 03/19/2009