

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # V10393

1. Entity Name
 NORTH AMERICA INVESTMENTS, INC.



Principal Place of Business
 4099 TAMMIAMI TRAIL NORTH
 SUITE 400
 NAPLES, FL 34103 US

Mailing Address
 C/O DAVID G. BUDD
 3033 RIVIERA DRIVE STE 201
 NAPLES, FL 34103 US



01302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0309630** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STARMAN, SHELDON W.
 4099 TAMMIAMI TRAIL NORTH
 SUITE 400
 NAPLES, FL 34103

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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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

3. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

U00000433278
 02/24/06-80010-025 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT STARMAN, SHELDON W. 4099 TAMMIAMI TRAIL N. NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BUDD, DAVID G 3033 RIVIERA DRIVE, SUITE 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GUSTEROV, RISTE 3033 RIVIERA DRIVE STE 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT TUPAROV, GLIGOR 3033 RIVIERA DRIVE STE 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVS VLASHO, LOU 3033 RIVIERA DRIVE STE 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

SIGNATURE: David G. Budd
 DAVID G. BUDD, ASSISTANT SECRETARY

2/8/06 (239) 263-7700

Date Daytime Phone #