## **2008 FOR PROFIT CORPORATION**

2008 08:00 A tate

| ANNOAL REPORT  |   |  |                       | Apr 10, 2000 00.0                                |  |                        |  |
|--|---|--|-----------------------|--|--|------------------------|--|
| 1. Entity Nam  | MENT # P04690 TINVESTMENT CORPORAT  | ION SANCE OF   |                       | mar was<br>wegen to                              | Source of the second se | Secreta                | ry of St   |
| Principal Place<br>170 MASON<br>GREENWICH,                         |   | Mailing Address<br>170 MASON STREET<br>GREENWICH, CT 06830 |                       | ]<br>  |  | 1111 BILLI BIBLI BIBLI | 11 <b>3</b> 31 <b>0</b> 3011 <b>0</b> 07 11 1007 |
| DO NOT WRITE IN  |   | IN THIS SPA  | CE                    | 01152008 No Chg-P CR2E034 (11/05)  4. FEI Number |  |                        |  |
|  | 6. Name and Address of Current Re   |  | ,                     |  | of Status Desired  |                        | 5 Additional equired                             |
| 8. The above   | 35TH STREET USE POINT, FL 33064  e named entity submits this statement for the titions of registered agent.  Signature, typed or printed name of registered agent and |  | ed office or register | ed agent, or bot                                 | NOT WI   | ACE                    | r with, and accept                               |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 |   | 9. Election Campaign Finan                                 | ncing\$5.             | .00 May Be<br>ed to Fees                         | 0000009<br>05/01/08-8  | 105545                 | 150.00   |
| 10.  | OFFICERS AND DI   | BECTORS  | I                     | 6.   |  | , , ,                  |  |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP                              | PTD DIAMANT, HERBERT 170 MASON STREET GREENWICH, CT 06830   |  |                       |  | # <u>*</u> * .   |                        | . *  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | SVPD<br>DIAMANT, MARTHA<br>170 MASON STREET<br>GREENWICH, CT 06830  |  | .,                    | A STATE OF                                       |  |                        | · .  |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP                              | . ,   |  |                       |  | NOT W  |                        | , , ,  |
| TITLE<br>NAME<br>STREET ADDRESS                                    |   |  | •                     | IN 7   | THIS SP  | ACE                    |  |

12. Thereby 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 chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statut

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS ·CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sec MARIMA DIAMANT 4/4/08 203-661-6410