2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 565610

Entity Name: INVESTACORP INC

FILED Mar 04, 2009 Secretary of State

Entity Name: INVESTACORPING.						
Current P	of Business:	New Prince	New Principal Place of Business:			
15450 NEV MIAMI LAK		201	15450 NEW BARN ROAD 201 MIAMI LAKES, FL 33014			
Current M	s:	New Maili	New Mailing Address:			
15450 NEV MIAMI LAK)		P.O. BOX 9320 MIAMI LAKES, FL 33014			
FEI Number:	59-1790176	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Na				Name and Address of New Registered Agent:		
FARRELL, PATRICK 15450 NEW BARN RD MIAMI LAKES, FL 33014 US			15450 NEV 201	FARRELL, PATRICK 15450 NEW BARN RD 201 MIAMI LAKES, FL 33014 US		
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	ts registere	ed office or registered agent, or both,	
SIGNATUR			03/04/2009			
	Electroni	c Signature of Registered Age	nt		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () FARRELL, PATE 5076 WATERS E COOPER CITY,	EDGE WAY	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	EVP () PECCI, PETER 16415 SAPPHIR WESTON, FL 33		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	EVPT () MANTECON, AS 8832 NW 150TH MIAMI LAKES, F	ST	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SVPS () NESTEL, RANDY 8502 NW 16TH S MIAMI, FL		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	EVP ()	Delete	Title:	SVP	(X) 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.

Name:

Address:

City-St-Zip:

VERGA, JOSEPH

15220 SW 49TH ST

MIRAMAR, FL 33027

SIGNATURE: ASELA MANTECON EVPT 03/04/2009

SHERWOOD, SCOTT

11706 MALAEUCA WAY

COOPER CITY, FL 33330

Name:

Address:

City-St-Zip: