


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 08:00 AM
Secretary of State

DOCUMENT # G69550
 1. Entity Name
 OLD CUTLER PROPERTIES, INC.



Principal Place of Business 9130 S DADELAND BLVD STE 1101 MIAMI, FL 33156 US	Mailing Address 9130 S DADELAND BLVD STE 1101 MIAMI, FL 33156 US
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DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2718417	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LAMCHICK, BRUCE
 TWO DATRAN CTR, 9130 S DADELAND BLVD
 STE 1101
 MIAMI, FL 33155

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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, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTR LAMCHICK, BRUCE 9130 S DADELAND BLVD #1101 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YOUNG-TENN, JOSECELYN L BOX 570052 MIAMI, FL 33257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT YOUNG-TENN, FAY BOX 570052 MIAMI, FL 33257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/31/05-80009-019 150.00

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12. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 designated 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: Josecelyn Young Tenn. President 3/29/05
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #