



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # G76947 1. Entity Name OLD WORLD EXOTIC FISH, INC.	
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Principal Place of Business 19255 SW 260TH ST P.O. BOX 970583 MIAMI, FL 33197	Mailing Address 19255 SW 260TH ST P.O. BOX 970583 MIAMI, FL 33197
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DO NOT WRITE IN THIS SPACE



04122008 No Chg-P CR2E034 (11/05)

4. FEI Number 38-2264023	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

DEMASON, LAIF J.
19255 SW 260TH STREET
HOMESTEAD, FL 33031

DO NOT WRITE IN THIS SPACE

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, 2008 Fee will be \$550.00

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

000000913371
 05/08/08-80013-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD DEMASON, LAIF J. 19255 SW 260 ST HOMESTEAD, FL
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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: *Jay Demason* Date: April 18, 2008 Daytime Phone #: 305 248 6640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR