

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G91976

FILED
Oct 19, 2007
Secretary of State**Entity Name:** CUTLER INSURANCE GROUP, INC.**Current Principal Place of Business:**5701 SW 107 AVE
105
MIA, FL 33173 US**New Principal Place of Business:****Current Mailing Address:**5701 SW 107 AVE
105
MIA, FL 33173 US**New Mailing Address:****FEI Number:** 59-2392898**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ALVAREZ, CONNIE
5701 SW 107 AVE
105
MIAMI, FL 33173 US**Name and Address of New Registered Agent:**DUENAS, PILAR
5701 SW 107 AVE
105
MIAMI, FL 33173 US

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.

SIGNATURE: PILAR DUENAS

10/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PST () Delete
Name: ALVAREZ, SR, CONNIE
Address: 5701 SW 107 AVE, SUITE 105
City-St-Zip: MIAMI, FL 33173**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PST (X) Change () Addition
Name: DUENAS, PILAR
Address: 5701 SW 107 AVE, SUITE 105
City-St-Zip: MIAMI, FL 33173

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.

SIGNATURE: PILAR DUENAS

P

10/19/2007

Electronic Signature of Signing Officer or Director

Date