

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085070

Entity Name: OLD CUTLER VILLAGE, INC.

FILED  
Apr 07, 2007  
Secretary of State

**Current Principal Place of Business:**

9734 SW 184TH ST  
MIAMI, FL 331576987

**New Principal Place of Business:**

**Current Mailing Address:**

9734 SW 184TH ST  
MIAMI, FL 331576987

**New Mailing Address:**

FEI Number: 65-1043177

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BASADRE, DAVID  
9734 SW 184 ST  
MIAMI, FL 33157 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: BASADRE, DAVID  
Address: 11405 SW 32 ST  
City-St-Zip: MIAMI, FL 33165

Title: SDD ( ) Delete  
Name: BASADRE, LILLIAN M  
Address: 11405 SW 32 ST  
City-St-Zip: MIAMI, FL 33165

Title: VD ( ) Delete  
Name: FERNANDEZ, CARMEN M  
Address: 16020 SW 89 AVE RD  
City-St-Zip: MIAMI, FL 33157

Title: VD ( ) Delete  
Name: FERNANDEZ, SERGIO J  
Address: 16020 SW 89 AVE RD  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BASADRE, DAVID

PTD

04/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date