## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

## Mar 28, 2008 08:00 AN **Secretary of State** DOCUMENT # P03000122902 1. Entity Name OLD CUTLER INVESTMENT CORP. Principal Place of Business 18400 SW 97 AVE 18400 SW 97 AVE MIAMI, FL. 33157 . MIAMI, FL 33157 No Cha-P CR2E034 (11/05) 01022008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0617459 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent DERRICK, RON J DO NOT WRITE 20401 SW 79 AVE MIAMI, FL 33189 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. DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! PEE 18 \$150.00 , Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00. 10. OFFICERS AND DIRECTORS TITLE DERRICK, RON J NAME' STREET ADDRESS 18400 SW 97 AVE. CITY-ST-ZIP MIAMI, FL 33157 NAME STREET ADDRESS CITY-ST-ZIP TITLE" NAME STREET ADDRESS DONOTAWRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS ۹۲Y-ST-Z(P 2. 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.

**FILED**