# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Oct 23, 2008**
**Secretary of State**

DOCUMENT# P95000054823

**Entity Name:** CARITECH AGENCIES INC.

**Current Principal Place of Business:**

6844 NW 77 COURT
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

6844 NW 77 COURT
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number: 65-0593974** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CHAI, AMAL
6844 NW 77 COURT
MIAMI, FL 33166 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

**OFFICERS AND DIRECTORS:**

Title: PDT ( ) Delete
Name: CHAI, AMAL
Address: 18034 SW 144 PLACE
City-St-Zip: MIAMI, FL 33177

Title: VSD ( ) Delete
Name: SIMMONS, OMAR
Address: 7627 SW 102ND PLACE
City-St-Zip: MIAMI, FL 33173

Title: PDT ( ) Delete
Name: CHAI, AMAL
Address: 6844 NW 77 COURT
City-St-Zip: MIAMI, FL 33166

Title: DIR ( ) Delete
Name: CRIMARCO, PHILIP N
Address: 6844 NW 77 COURT
City-St-Zip: MIAMI, FL 33166

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**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:

Title: DIR ( ) Change (X) Addition
Name: SIMMONS, JOSPEH
Address: 7627 SW 102 PLACE
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: AMAL CHAI PDT 10/23/2008

Electronic Signature of Signing Officer or Director — Date