2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000002835

FILED Apr 18, 2008 Secretary of State

Entity Name: MUTUAL INVESTMENT TRUST REALTY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
108 -96 S SUITE #30 BAY HARI		, FL 33154 US		
Current M	lailing Addres	ss:	New Mailing Addres	ss:
P.O. BOX	O G. MORALE 402803 ACH, FL 33140			
El Number	: 65-0929092	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
108-96TH 3UITE #30	S, HUGO G H STREET)1			
he above			ourpose of changing its registere	ed office or registered agent, or both,
he above the Stat	e named entity s e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above	e named entity s e of Florida. RE:	submits this statement for the		
The above in the State	e named entity : e of Florida. RE: Electror			ed office or registered agent, or both, Date
The above the State SIGNATU	e named entity : e of Florida. RE: Electror	submits this statement for the pair is state	ent	
The above in the Station Carolina Carol	e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC D () MORALES, HUI PO BOX 40280 MIAMI BEACH, D/P ()	submits this statement for the paic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete GO G 3 FL 33140	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title:	Date
The above in the State SIGNATU Section Carollection Carollectic Ca	e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC D () MORALES, HUI PO BOX 40280 MIAMI BEACH, D/P ()	submits this statement for the paic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete 30 G 3 FL 33140 Delete LISA DULBERG 3	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition

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: HUGO G. MORALES PRES 04/18/2008