# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Jun 29, 2006**
**Secretary of State**

DOCUMENT# 149070

**Entity Name:** EADS SOGERMA BARFIELD, INC.

**Current Principal Place of Business:**

4101 N.W. 29TH STREET
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

4101 N.W. 29TH STREET
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number: 59-0556588** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: COO ( ) Delete
Name: DENISE, FREDERIC
Address: 4101 N W 29TH ST
City-St-Zip: MIAMI, FL 33142

Title: SV ( ) Delete
Name: AIMARD, LAURENT
Address: 4101 NW 29 ST.
City-St-Zip: MIAMI, FL 33142

Title: SV ( ) Delete
Name: BUTLER, AL
Address: 98711 SW 105 COURT
City-St-Zip: MIAMI, FL 33176

Title: V ( ) Delete
Name: BERNARDO, RAQUEL
Address: 4101 NW 29 ST.
City-St-Zip: MIAMI, FL 33142

Title: SV ( ) Delete
Name: ROGERS, JOHN
Address: 7757 NW 25 ST.
City-St-Zip: MARGATE, FL 33063

Title: SV ( ) Delete
Name: IMPARATO, ANYHONY
Address: 4101 NW 29 ST
City-St-Zip: MIAMI, FL 33142

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

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

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

Title: SV (X) Change ( ) Addition
Name: BUTLER, BENJAMIN A
Address: 98711 SW 105 COURT
City-St-Zip: MIAMI, FL 33176

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: LAURENT AIMARD SV 06/29/2006

Electronic Signature of Signing Officer or Director Date