

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012361

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: EQUIDOT, INC.

## Current Principal Place of Business:

2003 NW 178 WAY  
PEMBROKE PINES, FL 33029 US

## New Principal Place of Business:

5944 CORAL RIDGE DR  
SUITE 119  
CORAL SPRINGS, FL 33076 US

## Current Mailing Address:

2003 NW 178 WAY  
PEMBROKE PINES, FL 33029 US

## New Mailing Address:

5944 CORAL RIDGE DR  
SUITE 119  
CORAL SPRINGS, FL 33076 US

FEI Number: 65-1074991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALVAREZ, RUBEN  
8385 NW 157 TERRACE  
MIAMI, FL 33016 US

## Name and Address of New Registered Agent:

LEMUS, FRANCISCO  
5944 CORAL RIDGE DR  
SUITE 119  
CORAL SPRINGS, FL 33076 US

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: FRANCISCO LEMUS

02/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SARIMENTO PEREZ, ROBERTO DEL C  
Address: 2003 NW 178 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VP (X) Delete  
Name: SARMIENTO, ESTER MS  
Address: 2003 N W 178 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: D (X) Delete  
Name: SAYOL, JESUS M  
Address: 3135 NW 184 ST, APT 2203  
City-St-Zip: AVENTURA, FL 33160 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEMUS, FRANCISCO  
Address: 5944 CORAL RIDGE DR  
City-St-Zip: CORAL SPRINGS, FL 33076 US

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 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: FRANCISCO LEMUS

P

02/03/2009

Electronic Signature of Signing Officer or Director

Date