2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013755

FILED Apr 28, 2009 Secretary of State

Entity Name: AJEN FALCON ADVANCED TECHNOLOGY AND DESIGN, INC.

Current Principal Place of Business: New Principal Place of Business:

2500 CORAL SPRINGS DRIVE 7649 FOREST GREEN LANE SUITE 312 BOYNTON BEACH, FL 33436

CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

2500 CORAL SPRINGS DRIVE 7649 FOREST GREEN LANE SUITE 312 BOYNTON BEACH, FL 33436 CORAL SPRINGS, FL 33065

FEI Number: 04-3637701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOZINDA, MARITA
2500 CORAL SPRINGS DRIVE
SUITE 312
CORAL SPRINGS, FL 33065 US

KOZINDA, MARITA
7649 FOREST GREEN LANE
BOYNTON BEACH, FL 33436 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: 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 SOKOLOV, EVGUENI
 Name:
 SOKOLOV, EVGUENI

 Address:
 2500 CORAL SPRINGS DRIVE #312
 Address:
 7649 FOREST GREEN LANE

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 BOYNTON BEACH, FL 33436

Title: T () Delete Title: T (X) Change () Addition

Name: KOZINDA, MARITA Name: KOZINDA, MARITA

Address: 2500 CORAL SPRINGS DRIVE #312 Address: 7649 FOREST GREEN LANE City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: BOYNTON BEACH, FL 33436

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: MARITA KOZINDA T 04/28/2009