

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112335

Entity Name: BUSINESS INTERNATIONAL, CORP.

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

436 LAKE VIEW DR., BLDG. 94, STE. 203
WESTON, FL 33326

New Principal Place of Business:

1500 WESTON ROAD
SUITE 200-216
WESTON, FL 33326

Current Mailing Address:

436 LAKE VIEW DR., BLDG. 94, STE. 203
WESTON, FL 33326

New Mailing Address:

1500 WESTON ROAD
SUITE 200-216
WESTON, FL 33326

FEI Number: 20-1434650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARVAEZ, MONICA P
436 LAKE VIEW DR., BLDG. 94, STE. 203
WESTON, FL 33326 US

Name and Address of New Registered Agent:

NARVAEZ, MONICA P
4038 PEPPERTREE DR
WESTON, FL 33332 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: NARVAEZ MONICA P

05/05/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: GM () Delete
Name: NARVAEZ, MONICA P
Address: 436 LAKE VIEW DR., BLDG. 94, STE. 203
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: DUENAS, DIEGO R
Address: 436 LAKE VIEW DR., BLDG. 94, STE. 203
City-St-Zip: WESTON, FL 33326

Title: AM () Delete
Name: MALDONADO, PEDRO J
Address: 436 LAKE VIEW DR., BLDG. 94, STE. 203
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: GM (X) Change () Addition
Name: NARVAEZ, MONICA P
Address: 1500 WESTON ROAD SIUTE 200-216
City-St-Zip: WESTON, FL 33326

Title: SD (X) Change () Addition
Name: TOMARAS, DIMITRIOS R
Address: 1500 WESTON ROAD SUITE 200-216
City-St-Zip: WESTON, FL 33326

Title: AM (X) Change () Addition
Name: MALDONADO, PEDRO J
Address: 1500 WESTON ROAD SIUTE 200-216
City-St-Zip: WESTON, FL 33326

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: NARVAEZ MONICA P

GM

05/05/2009

Electronic Signature of Signing Officer or Director

Date