

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 550935

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: MICHRON INCORPORATED

## Current Principal Place of Business:

3489 GRIFFIN ROAD  
FT. LAUDERDALE, FL 33312 US

## New Principal Place of Business:

## Current Mailing Address:

C/O R.L LEVY  
8435 PRK GARE RD  
BOCA RATON, FL 33496 US

## New Mailing Address:

C/O ALFRED DELUCA  
11448 LAKEVIEW DRIVE  
CORAL SPRINGS, FL 33065 US

FEI Number: 59-1776325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELUCA, AL  
3489 GRIFFIN ROAD  
FORT LAUDERDALE, FL 33312 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DELUCA, AL,  
Address: 11448 LAKEVIEW DRIVE  
City-St-Zip: CORAL SPRINGS, FL

Title: VPD (X) Delete  
Name: BOSSANO, DANIEL  
Address: 2551 NW 92 AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD ( ) Delete  
Name: BOSSANO, JULIA  
Address: 2551 NW 92 AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ALFRED DELUCA

PRES

01/29/2009

Electronic Signature of Signing Officer or Director

Date