

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 676867

Entity Name: CARBEN, INC.

**FILED**  
**Apr 29, 2009**  
**Secretary of State****Current Principal Place of Business:**8600 N.W. 17TH STREET.  
130  
MIAMI, FL 33126 US**New Principal Place of Business:****Current Mailing Address:**8600 N.W. 17TH STREET.  
130  
MIAMI, FL 33126 US**New Mailing Address:**

FEI Number: 59-2127845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**CT 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: C ( ) Delete  
Name: PAIZ, FERNANDO  
Address: 12 CALLE 1-80, ZONA 9  
City-St-Zip: GUATEMALA CITY, GUTitle: CFO ( ) Delete  
Name: SUCRE, ROBERTO J  
Address: 12 STREET 1-28 ZONA 9, MOL BLDG  
City-St-Zip: GUATEMALA CITY, GUTitle: PG ( ) Delete  
Name: PELAYO, AMERICA  
Address: 8600 N.W. 17 STREET  
City-St-Zip: MIAMI, FL 33126Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DCP (X) Change ( ) Addition  
Name: CAMACHO CARVAJAL, GUSTAVO  
Address: 3 CALLE 35 EDIFICIO URIBE & PAGES  
City-St-Zip: SAN JOSE, CRTitle: DCFO (X) Change ( ) Addition  
Name: SUCRE, ROBERTO J  
Address: 12 STREET 1-28 ZONA 9, MOL BLDG  
City-St-Zip: GUATEMALA CITY, GUTitle: G (X) Change ( ) Addition  
Name: PELAYO, AMERICA  
Address: 8600 N.W. 17 STREET  
City-St-Zip: MIAMI, FL 33126Title: DS ( ) Change (X) Addition  
Name: ZUNIGA SIBAJA, MANUEL F  
Address: 3 CALLE 35 EDIFICIO URIBE & PAGES  
City-St-Zip: SAN JOSE, CR

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: AMERICA PELAYO

G

04/29/2009

Electronic Signature of Signing Officer or Director

Date