2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# F01000004737

Entity Name: PRAMAC INDUSTRIES, INC.

Current Principal Place of Business:

1100-C COBB PKWY NORTH
MARIETTA, GA 30066

New Principal Place of Business:

10100 NW 116TH WAY
SUITE 10
MEDLEY, FL 33178

Current Mailing Address:

10100 NW 116TH WAY SUITE 10
MEDLEY, FL 33178

New Mailing Address:

10100 NW 116TH WAY
SUITE 10
MEDLEY, FL 33178

FEI Number: 58-2274313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ENRIQUEZ, STEPHEN C
ONE SE THIRD AVENUE
SUITE 1440
MIAMI, FL 33131 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: PRES ( ) Delete
Name: NAVARRO, RICARDO
Address: 10100 NW 116TH WAY SUITE 10
City-St-Zip: MEDLEY, FL 33178 US

Title: VICE ( ) Delete
Name: COMPINITI, PAOLO
Address: 10100 NW 116TH WAY SUITE 10
City-St-Zip: MEDLEY, FL 33178 US

Title: SEC ( ) Delete
Name: SCHWARZ, CAROLINA
Address: 10100 NW 116TH WAY SUITE 10
City-St-Zip: MEDLEY, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VICE (X) Change ( ) Addition
Name: CAMPINOTI, PAOLO
Address: 10100 NW 116TH WAY SUITE 10
City-St-Zip: MEDLEY, FL 33178 US

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: ANA CARDENAS ACCT 03/10/2009

Electronic Signature of Signing Officer or Director — Date