

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004833

Entity Name: AUDEMAT-AZTEC, INC.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

19595 NE 10 AVE
SUITE A
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

19595 NE 10 AVE
SUITE A
MIAMI, FL 33179

New Mailing Address:

FEI Number: 52-2180745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROST, BRUNO
19595 NE 10 AVE
SUITE A
MIAMI, FL 33179 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: PST () Delete
Name: ROST, BRUNO
Address: 1021 IVES DAIRY ROAD -SUITE #117
City-St-Zip: MIAMI, FL 33179

Title: CD () Delete
Name: ROST, BRUNO
Address: 1021 IVES DAIRY ROAD - SUITE #117
City-St-Zip: MIAMI, FL 33179

Title: EVP () Delete
Name: POULAIN, CHRISTOPHE
Address: 2111 NE 210TH ST
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: ROST, BRUNO
Address: 19595 NE 10TH AVENUE SUITE A
City-St-Zip: MIAMI, FL 33179

Title: CD (X) Change () Addition
Name: ROST, BRUNO
Address: 19595 NE 10TH AVENUE SUITE A
City-St-Zip: MIAMI, FL 33179

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: CHRISTOPHE POULAIN

EVP

03/19/2009

Electronic Signature of Signing Officer or Director

Date