## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000005887

Entity Name: BULBTRONICS S.A., INC.

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1835 NW 112TH AVE 185 MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 45 BANFI PLAZA FARMINGDALE, NY 11735 FEI Number: 26-1509081 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED CORPORATE SERVICES INC UNITED CORPORATE SERVICES INC 9200 OUTH DADELAND BLVD. 9200 SOUTH DADELAND BLVD. SUITE 508 SUITE 508 MIAMI, FL 33156 US MIAMI, FL 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: 04/30/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CHRM ( ) Delete Title: () Change () Addition THAW, BRUCE R Name: Name: 45 BANFI PLAZA Address: Address: City-St-Zip: FARMINGDALE, NY 11735 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: THAW, BRUCE R Name: 45 BANFI PLAZA Address: Address: FARMINGDALE, NY 11735 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VCRH () Change () Addition DAHDOUH, JOHN M Name: Name: 1330 SW/ 175 WAY Address: Address: City-St-Zip: PEMBROKE PINES, FL 330294924 City-St-Zip: Title: ( ) Delete Title: () Change () Addition DAHDOUH, JOHN M Name: Name: Address: 1330 SW 175 WAY Address: City-St-Zip: PEMBROKE PINES, FL 330294924 City-St-Zip: Title: Title: SD ( ) Delete () Change () Addition ZINZI, ANDREW P Name: Name: 45 BANFI PLAZA Address: Address: FARMINGDALE, NY 11735 City-St-Zip: City-St-Zip: Title: CFO () Delete Title: () Change () Addition ZINZI, ANDREW P Name: Name: 45 BANFI PLAZA Address: Address: City-St-Zip: City-St-Zip: FARMINGDALE, NY 11735

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: CELESTE C. MCLAREN, CONTROLLER CONT 04/30/2009