

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004682

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: CAYAL LTD, INC.

**Current Principal Place of Business:**

CALEDONIA HOUSE, GEORGE TOWN  
GRAND CAYMAN  
CAYMAN ISLANDS, BWI,

**New Principal Place of Business:**

4298 FOX RIDGE DRIVE  
WESTON, FL 33331

**Current Mailing Address:**

4298 FOX RIDGE DRIVE  
WESTON, FL 33331

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BORTESI, BRUNO L  
4298 FOX RIDGE DRIVE  
WESTON, FL 33331    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: CP                      ( ) Delete  
Name: BORTESI, BRUNO L  
Address: 4298 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

Title: DT                      ( ) Delete  
Name: DE BORTESI, ALBA O  
Address: 4298 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

Title: DS                      ( ) Delete  
Name: OLIVIERI, BRUNO B  
Address: 4298 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DT                      (X) Change ( ) Addition  
Name: OLIVIERI DE BORTESI, ALBA M  
Address: 4298 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

Title: DS                      (X) Change ( ) Addition  
Name: BORTESI OLIVIERI, BRUNO A  
Address: 4298 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

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: BRUNO L BORTESI

CP

01/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date