

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# J76106

**FILED**  
**Nov 20, 2009**  
**Secretary of State**

**Entity Name:** CUSTOM CONTROLS TECHNOLOGY, INC.

**Current Principal Place of Business:**

3501 N.W. 60 STREET  
MIAMI, FL 33142 US

**New Principal Place of Business:**

**Current Mailing Address:**

3501 N.W. 60 STREET  
MIAMI, FL 33142 US

**New Mailing Address:**

**FEI Number:** 65-0003633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALLO, GERARDO  
6345 WEST 10 AVE  
HIALEAH, FL 33012 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: PT ( ) Delete  
Name: GALLO, GERARDO  
Address: 6345 WEST 10 AVE  
City-St-Zip: HIALEAH, FL 33012

Title: VP/S ( ) Delete  
Name: GALLO, SHEILA  
Address: 6345 WEST 10 AVE  
City-St-Zip: HIALEAH, FL 33012

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

Title: VP/S (X) Change ( ) Addition  
Name: GALLO, GERARDO  
Address: 6345 WEST 10 AVE  
City-St-Zip: HIALEAH, FL 33012

Title: PT (X) Change ( ) Addition  
Name: GALLO, SHEILA  
Address: 6345 WEST 10 AVE  
City-St-Zip: HIALEAH, FL 33012

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: GERARDO GALLO

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11/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date