2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K41388

Entity Name: SEGUTRONIC INTERNATIONAL INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8280 NW 27TH STREET 1825 NW 112TH AVE. SUITE 515 SUITE 151

MIAMI, FL 33122 US MIAMI, FL 33172 US

Current Mailing Address: New Mailing Address:

8280 NW 27TH STREET 1825 NW 112TH AVE. SUITE 515 SUITE 151

MIAMI, FL 33122 US MIAMI, FL 33172 US

FEI Number: 65-0080223 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:

GAMERO, CARLOS
8280 NW 27TH STREET SUITE 515
MIAMI, FL 33122
US
GAMERO, CARLOS
1825 NW 112TH AVE.
SUITE 151

MIAMI, FL 33122 US SUITE 151 MIAMI, FL 33172 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: 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

 Name:
 GAMERO, CARLOS
 Name:
 GAMERO, CARLOS

 Address:
 8280 NW 27TH STREET SUITE 515
 Address:
 1825 NW 112TH AVE. SUITE 151

 Address:
 8280 NW 27TH STREET SUITE 515
 Address:
 1825 NW 112TH AVE. SUITE 151

 City-St-Zip:
 MIAMI, FL 33122 US
 City-St-Zip:
 MIAMI, FL 33172 US

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Name: GAMERO, LIVIA Name: GAMERO, LIVIA

Address: 8280 NW 27TH STREET SUITE 515 Address: 1825 NW 112TH AVE. SUITE 151

City-St-Zip: MIAMI, FL 33122 US City-St-Zip: MIAMI, FL 33172 US

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

Name: GAMERO, NATALIE Name: GAMERO, NATALIE

Address: 8280 NW 27TH STREET SUITE 515 Address: 1825 NW 112TH AVE. SUITE 151

City-St-Zip: MIAMI, FL 33122 US City-St-Zip: MIAMI, FL 33172 US

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: NATALIE GAMERO VP 04/24/2009