2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M23094

Entity Name: PICASO BUSINESS INC.

FILED Jan 17, 2009 Secretary of State

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

4871 W. FLAGLER ST. 4330 SW 102 AVE MIAMI, FL 33134 US MIAMI, FL 33165 US

Current Mailing Address: New Mailing Address:

P.O. BOX 557547 MIAMI, FL 33255

FEI Number: 59-2659217 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:

 CASTILLO, ADA A
 CASTILLO, NOEL

 4871 W. FLAGLER ST.
 4330 SW 102 AVE

 MIAMI, FL 33134 US
 MIAMI, FL 33165 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: NOEL CASTILLO 01/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 CASTILLO, ADA A
 Name:
 CASTILLO, NOEL

 Address:
 4871 W. FLAGLER ST.
 Address:
 4330 SW 102 AVE

 City-St-Zip:
 MIAMI, FL 33134
 City-St-Zip:
 MIAMI, FL 33165

 Name:
 CASTILLO, SECUNDINO,
 Name:
 CASTILLO, SECUNDINO,

 Address:
 1321-A NW 31 AVENUE
 Address:
 11291 SW 177 STREET

 City-St-Zip:
 MIAMI, FL 33135
 City-St-Zip:
 MIAMI, FL 33157

Title: S () Delete Title: () Change () Addition

 Name:
 MALLON, MIOZOTIS
 Name:

 Address:
 4330 SW 102 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33165
 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: NOEL CASTILLO PT 01/17/2009