2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M87511

Entity Name: AZUVI, INC.

FILED Mar 24, 2008 Secretary of State

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

13291 VANTAGE WAY STE 103

JACKSONVILLE, FL 32218 US

Current Mailing Address: New Mailing Address:

13291 VANTAGE WAY STE 103

JACKSONVILLE, FL 32218 US

FEI Number: 59-2896487 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:

RAX CO. RAX CO

C/0 LISA A. PURVIS
50 NORTH LAURA STREET, SUITE 3300
50 NORTH LAURA STREET SUITE 3300
50 NORTH LAURA STREET

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 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: 03/24/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: DP (X) Change () Addition

Name:BOU AVELLANA, ESTEBANName:AUSSERMEIER, OTTMARAddress:AVDA. ITALIA 58Address:AVDA. ITALIA 58

City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP

Title: AS () Delete Title: T (X) Change () Addition Name: HALVERSON, ERIC T Name: LAGO AVILA, ESPERANZA

 Name:
 HALVERSON, ERIC T
 Name:
 LAGO AVILA, ESPERANZA

 Address:
 AVDA. ITALIA 58
 Address:
 AVDA. ITALIA 58

City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP

Title: VP () Delete Title: GM (X) Change () Addition Name: PLOCH, MATTHIAS Name: KAN, MICHAEL Address: AVDA_ITALIA_58

City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP City-St-Zip: VILLARREAL, SPAIN, SP 12550 SP

Title: COO () Delete Title: () Change () Addition

 Name:
 BEA, VICENTE
 Name:

 Address:
 AVDA. ITALIA 58
 Address:

 City-St-Zip:
 VILLARREAL, SPAIN, SP 12550 SP
 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: MICHAEL KAN GM 03/24/2008