2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000720

FILED Mar 20, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New	Principal Place	of Business:	
23150 SAN	NDALFOOT P	LAZA DR				
BOCA RA	TON, FL 3342	28				
Current M	lailing Addre	ss:	Nev	Mailing Address	s:	
23150 SAN	NDALFOOT P	LAZA DR				
BOCA RA	TON, FL 3342	28				
FEI Number:	: 65-0935133	FEI Number Applied F	or () FEI Number N	lot Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			gent: Nan	Name and Address of New Registered Agent:		
SACHS & SAX ATTORNEYS AT LAW 301 YAMATO RD STE 4150 BOCA RATON, FL 33431 US				ASSOCIATED CORPORATE SERVICES, LLC 6111 BROKEN SOUND PARKWAY NW BOCA RATON, FL 33487 US		
BOCA RA	ION, FL 3343	31 US				
The above	·		BOO	CA RATON, FL 33		ooth,
The above in the State	named entity e of Florida. RE: LOU CAI	submits this statemen	BOC t for the purpose of cha	CA RATON, FL 33	487 US	ooth,
The above in the State	named entity e of Florida. RE: LOU CAI	submits this statemen	BOC t for the purpose of cha	CA RATON, FL 33	487 US d office or registered agent, or b	ooth,
The above in the State SIGNATUF	named entity e of Florida. RE: LOU CAI	submits this statemen PLAN nic Signature of Regis	BOO t for the purpose of cha tered Agent	CA RATON, FL 33	487 US d office or registered agent, or b 03/20/2009	
The above in the State SIGNATUF	named entity e of Florida. RE: LOU CAI Electro	submits this statemen PLAN nic Signature of Regis TORS:) Delete RRY IGTON CT	t for the purpose of chatered Agent ADI Title: Name Addre	CA RATON, FL 33 Inging its registered DITIONS/CHANGE	487 US d office or registered agent, or b 03/20/2009 Date	
The above in the State SIGNATUF OFFICERS Title: Name: Address:	named entity of Florida. RE: LOU CAI Electro S AND DIRECT (BELLACK, LAF 11636 KENSIN BOCA RATON)	submits this statemen PLAN nic Signature of Regis CTORS:) Delete RRY IGTON CT FL 33428) Delete	t for the purpose of chatered Agent Title: Name Addre City- Title: Name Addre Addre	CA RATON, FL 33 Inging its registered DITIONS/CHANGE SESS: ST-Zip: WTD MARTI, JUAN PSS: 11557 KENS	d office or registered agent, or b 03/20/2009 Date ES TO OFFICERS AND DIRECT () Change () Addition (X) Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN MARTI VTD 03/20/2009