

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 30, 2007
Secretary of State**

DOCUMENT# P00000009380

Entity Name: VETCO INTERNATIONAL, INC.

Current Principal Place of Business:

7575 KINGSPONTE PARKWAY
UNIT 19 & 20.
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7575 KINGSPONTE PARKWAY
UNIT 19 & 20.
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-3622279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA-RUBIO, EDWIN E
418 CAMPUS STREET
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

LAMARCHE, CARLOS J
319 ACADIA LN
CELEBRATION, FL 34747 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: CARLOS LAMARCHE 09/30/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEGURA, ALI
Address: 1001 INDIGO DR.
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: GOMEZ, BAHIA
Address: 1001 INDIGO DR.
City-St-Zip: CELEBRATION, FL 34747

Title: PD () Delete
Name: LAMARCHE, CARLOS J
Address: 319 ACADIA LN
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: ACOSTA-RUBIO, EDWIN E
Address: 418 CAMPUS STREET
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CARLOS LAMARCHE PD 09/30/2007
Electronic Signature of Signing Officer or Director Date