## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000002638

Entity Name: LATIN AMERICAN NAUTILUS SERVICE INC

FILED Apr 15, 2008 Secretary of State

		MERCIONICI TO THE CONTROL	L 11 <b>1</b> 0.		
Current Principal Place of Business:			New Principal Place of Business:		
200 S. BIS	IA FINANCIAL CAYNE BLVD 331312382				
Current Mailing Address:			New Mailing Address:		
200 S. BIS	IA FINANCIAL CAYNE BLVD 331312382				
FEI Number	: 65-1074373	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
1201 HAY	ATION SERVIO S STREET SSEE, FL 323				
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing i	its registered	office or registered agent, or both,
SIGNATU	RE:				
	Electror	nic Signature of Registered Age	ent		Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	LAMBARRI, CA	NE BLVD STE 4600	Title: Name: Address: City-St-Zip:	LAMBARRI, C 200 S BISCAY	NE BLVD STE 4600
Title: Name: Address: City-St-Zip:	FALZONI, EDU	NE BLVD STE 4600	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	ARMATO, FRAI	NE BLVD SUITE 4600	Title: Name: Address: City-St-Zip:	ARMATO, FRA	NE BLVD SUITE 4600
Title: Name: Address: City-St-Zip:	DE ROSA, SAB	NE BLVD SUITE 4600	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	BENITO, JOSE	NE BLVD SUITE 4600	Title: Name: Address: City-St-Zip:	(	) 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: F ARMATO D&O 04/15/2008