

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058564

FILED
Apr 13, 2012
Secretary of State

Entity Name: POSE TECH, CORPORATION

Current Principal Place of Business:

1825 PONCE DE LEON BLVD.
#460
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1825 PONCE DE LEON BLVD.
#460
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1112138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMANOV, SVETLANA
1825 PONCE DE LEON BLVD.
#460
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: ROMANOV, NICHOLAS
Address: 1825 PONCE DE LEON BLVD., #460
City-St-Zip: CORAL GABLES, FL 33134

Title: BUSM
Name: ROMANOV, SVETLANA
Address: 1825 PONCE DE LEON BLVD., #460
City-St-Zip: CORAL GABLES, FL 33134

Title: DIRO
Name: ROMANOV, SVETLANA N
Address: 1825 PONCE DE LEON BLVD., #460
City-St-Zip: CORAL GABLES, FL 33134

Title: VP
Name: ROMANOV, SEVERIN
Address: 1825 PONCE DE LEON BLVD., #460
City-St-Zip: CORAL GABLES, FL 33134

Title: DIR
Name: ROMANOV, NICHOLAS N
Address: 1825 PONCE DE LEON BLVD., #460
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: SVETLANA ROMANOV

BUSM

04/13/2012

Electronic Signature of Signing Officer or Director

Date