2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

DOCUMENT# P01000080287

Entity Name: AZTEC, INC.

Current Principal Place of Business:

725 SANTUARY RD.
NAPLES, FL 34120

New Principal Place of Business:

Current Mailing Address:

725 SANTUARY RD.
NAPLES, FL 34120

New Mailing Address:

FEI Number: 59-3740855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCSHAND, GLENN R
725 SANTUARY RD.
NAPLES, FL 34120 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCSHAND, GLENN
Address: 725 SANTUARY RD.
City-St-Zip: NAPLES, FL 34120

Title: D ( ) Delete
Name: ALDRIDGE, DOUGLAS
Address: 725 SANTUARY RD.
City-St-Zip: NAPLES, FL 34120

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition
Name: CUBILLOS, ALFREDO
Address: 3410 WATERLILY CT. 201
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Change (X) Addition
Name: CUBILLOS, SANDRA
Address: 3410 WATERLILY CT. 201
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: GLENN MCSHAND D 02/10/2009

Electronic Signature of Signing Officer or Director — Date