# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 23, 2009**
**Secretary of State**

DOCUMENT# P02000008044

**Entity Name:** ITAUTEC AMERICA, INC.

**Current Principal Place of Business:**

1935 NW 87TH AVENUE
MIAMI, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

1935 NW 87TH AVENUE
MIAMI, FL 33172 US

**New Mailing Address:**

**FEI Number: 75-2614882** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PD ( ) Delete
Name: SETUBAL NETO, PAULO
Address: AV. PAULISTA , 1938, 5O ANDAR
City-St-Zip: SAO PAULO, SP 01310 BZ

Title: VPD ( ) Delete
Name: VITA FILHO, CLAUDIO
Address: AV. PAULISTA , 1938, 5O ANDAR
City-St-Zip: SAO PAULO, SP 01310 BZ

Title: VPD ( ) Delete
Name: ARCHER DE CASTILHO, GUILHERME
Address: AV. PAULISTA , 1938, 5O ANDAR
City-St-Zip: SAO PAULO, SP 01310 BZ

Title: TD ( ) Delete
Name: SETUBAL, RICARDO EGYDIO
Address: AV. PAULISTA , 1938, 5O ANDAR
City-St-Zip: SAO PAULO, SP 01310 BZ

Title: SGM ( ) Delete
Name: ARCHER DE CASTILHO, EDUARDO
Address: 1935 NW 87TH AVENUE
City-St-Zip: MIAMI, FL 33172 US

**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:

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: EDUARDO ARCHER DE CASTILHO SGM 03/23/2009

Electronic Signature of Signing Officer or Director Date