

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029359

FILED
May 01, 2009
Secretary of State

Entity Name: SEAMLESS TECHNOLOGY, INC.

Current Principal Place of Business:

1400 NW 96 AVENUE
SUITE 110
MIAMI, FL 33172

New Principal Place of Business:

7801 NW 15 STREET
MIAMI, FL 33126

Current Mailing Address:

1400 NW 96 AVENUE
SUITE 110
MIAMI, FL 33172

New Mailing Address:

7801 NW 15 STREET
MIAMI, FL 33126

FEI Number: 04-3631074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAFALOWICZ, BORYS
1400 NW 96 AVENUE
SUITE 110
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

RAFALOWICZ, BORYS
7801 NW 15 STREET
MIAMI, FL 33126 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:

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CPDS () Delete
Name: BORYS, RAFALOWICZ
Address: 9315 NW 50 DORAL CIRLE S.
City-St-Zip: MIAMI, FL 33178

Title: DT () Delete
Name: NICK, NISHIWAKI S
Address: 21150 POINT PLACE # 1205
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: BRIAN, POPKEN
Address: 5 LAKE CAROLINA WAY, SUITE 230
City-St-Zip: HARBORSIDE T.C. COLUMBIA, SC 29229

Title: D () Delete
Name: NICK, SCOTT
Address: 6700 BROKEN SOUND PARKWAY NW,S200
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: NISHIWAKI, NICK S
Address: 21150 POINT PLACE # 1205
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Change () Addition
Name: POPKEN, BRIAN
Address: 5 LAKE CAROLINA WAY, SUITE 230
City-St-Zip: HARBORSIDE T.C. COLUMBIA, SC 29229

Title: D (X) Change () Addition
Name: SCOTT, NICK
Address: 6700 BROKEN SOUND PARKWAY NW,S200
City-St-Zip: BOCA RATON, FL 33487

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: BORYS RAFALOWICZ

CPDS

05/01/2009

Electronic Signature of Signing Officer or Director

Date