## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000067152

Entity Name: HEXAGON CORPORATION

FILED Aug 21, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
30 ANDREWS AVENUE				30 ANDREWS AVENUE			
SUITE 20 DELRAY BEACH, FL 33483				SUITE 8 DELRAY BEACH, FL 33483			
Current Mailing Address:				New Mailing Address:			
30 ANDREWS AVENUE				30 ANDREWS AVENUE			
SUITE 20				SUITE 8			
DELRAY BEACH, FL 33483				DELRAY BEACH, FL 33483			
FEI Number:	56-2403143	FEI Number Applied For ( )	FEI Num	ber Not Appli	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	D SCHMIDT HEAST 4TH A	AVENUE					
DELRAY BEACH, FL 33483 US							
The above in the State		submits this statement for the pu	rpose of	changing it	s registered o	office or registered agent, or both,	
SIGNATURE:							
Electronic Signature of Registered Agent						Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP ( NIETO, ROBEI 30 ANDREWS DELRAY BEAC	AVENUE		Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	DS ( NIETO, MARTH 30 ANDREWS DELRAY BEAC	AVENUE		Title: Name: Address: City-St-Zip:	DS (X NIETO, VERON 6 HILLTOP PL RYE, NY 1058	ACE	
Title: Name: Address: City-St-Zip:	DT ( HOYOS, ANDF 30 ANDREWS DELRAY BEAC	AVENUE		Title: Name: Address: City-St-Zip:	DT (X NIETO, LAURA 6 HILLTOP PL RYE, NY 1058	ACE	
Title: Name: Address: City-St-Zip:	AD ( NIETO, MAURI CALLE 101 NO BOGOTA, CO	CIO		Title: Name: Address: City-St-Zip:	NIETO, DANIE	PARK BLVD. APT 2	
Title: Name: Address: City-St-Zip:	AD (X NIETO, LUZ A CALLE 101 NO BOGOTA, CO	(i) Delete 0 18-09		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: ROBERTO NIETO - PRESIDENT DP 08/21/2009