## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000093234

Entity Name: PREMEX INC

City-St-Zip:

BOCA RATON, FL 33486

FILED Mar 27, 2009 Secretary of State

Littly Nai	HE. FREIVIEN	LING					
Current Principal Place of Business:			New Prir	New Principal Place of Business:			
433 PLAZA STE 275 BOCA RA	A REAL TON, FL 3343	2					
Current Mailing Address:			New Mai	New Mailing Address:			
433 PLAZA STE 275 BOCA RA	A REAL TON, FL 3343	2					
FEI Number:	: 11-3652202	FEI Number Applied For ( )	FEI Number Not Ap	plicable ( )	Certificate of Status Desired (	(X)	
Name and Address of Current Registered Agent:			Name an	Name and Address of New Registered Agent:			
VALENCIA, CARLOS F 445 NE 195 ST. #432 MIAMI, FL 33179 US				VALENCIA, CARLOS F 888 BISCAYNE BLVD #2211 MIAMI, FL 33132 US			
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing	ı its registere	ed office or registered agent, or	both,	
SIGNATURE: CARLOS VALENCIA				03/27/2009			
	Electron	nic Signature of Registered Ag	ent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANG	ES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	PREMEX S.A., AUTOPISTA SU	) Delete JR NO. 2 SUR 251 DLOMBIA, . 00000	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP ( VALENCIA, CA 445 NE 195 ST MIAMI, FL 331	APT 424	Title: Name: Address: City-St-Zip:	888 BISCA	(X) Change ( ) Addition CARLOS F YNE BLVD #2211 33132		
Title: Name: Address:	S ( MESA, ALEJAN 21694 WESSE		Title: Name: Address:		( ) 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.

City-St-Zip:

SIGNATURE: CARLOS VALENCIA VP 03/27/2009