## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000142323

BALA, NEMANI

TAMPA, FL 33626

11641 BRISTOL CHASE DRIVE

Name: Address:

City-St-Zip:

Entity Name: AMZUR TECHNOLOGIES, INC.

FILED Jan 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 400 N. ASHLEY DRIVE 400 N. ASHLEY DRIVE #2600 #2200 TAMPA, FL 33602 TAMPA, FL 33602 **Current Mailing Address: New Mailing Address:** 11641 BRISTOL CHASE DR. 400 N. ASHLEY DRIVE #2600 TAMPA, FL 33626 TAMPA, FL 33602 FEI Number: 73-1720999 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEMANI, BALA M 11641 BRISTOL CHASE DR. TAMPA, FL 33624 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition NEMANI, RANI P Name: Name: 11641 BRISTOL CHASE DR. Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: TD Title: () Delete () Change () Addition Name: NEMANI, SEKHAR V Name: 1310 BAY HARBOR DR. # 204 Address: Address: PALM HARBOR, FL 34685 City-St-Zip: City-St-Zip: Title: Title: SD () Delete SD (X) Change ( ) Addition RAMMOHAN, CHEREDDY BALA, NEMANI Name: Name: 2315 MESSENGER CIRCLE 11641 BRISTOL CHASE DR. Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: TAMPA, FL 33626 Title: SD (X) Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: BALA NEMANI VP 01/28/2009