

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108775

Entity Name: AMERINFO TECHNOLOGY INC.

FILED  
Jan 06, 2008  
Secretary of State

**Current Principal Place of Business:**

14401 W PALOMINO DRIVE  
SOUTHWEST RANCHES, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

14401 W PALOMINO DRIVE  
SOUTHWEST RANCHES, FL 33330

**New Mailing Address:**

FEI Number: 65-1148470      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAGEN, RICHARD S  
14401 W PALOMINO DRIVE  
SOUTHWEST RANCHES, FL 33330 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: D ( ) Delete  
Name: HAGEN, RICHARD SR.  
Address: 14401 W PALOMINO DR.  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: VP ( ) Delete  
Name: HAGEN, JOANN C  
Address: 14401 W PALOMINO DR.  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: CEO ( ) Delete  
Name: HAGEN, RICHARD  
Address: 14401 W PALOMINO DR.  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: PD ( ) Delete  
Name: BRUDER, GEORGE A JR  
Address: 14401 W PALOMINO DRIVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: CTOD ( ) Delete  
Name: GOPAL, NUGEHALLI  
Address: 14401 W PALOMINO DRIVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: DC ( ) Delete  
Name: CHEVLIN, SANFORD Z  
Address: 14401 W PALOMINO DRIVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

**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:

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: GOPAL NUGEHALLI

CTOD

01/06/2008

Electronic Signature of Signing Officer or Director

Date