## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000091059

Entity Name: TECNO MEGATAPE CORP

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7586 NW 113 PATH 5584 NW 114 AVE APT 101

MEDLEY, FL 33178 MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

7586 NW 113 PATH 5584 NW 114 AVE APT 101

MEDLEY, FL 33178 MIAMI, FL 33178

FEI Number: 26-0714378 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 USECHE, JOSE L
 USECHE, JOSE L

 7586 NW 113 PATH
 5584 NW 114 AVE APT 101

 MEDLEY, FL 33178
 US

 MIAMI, FL 33178
 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: JOSE L USECHE 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: LEON, MIGUEL Name: LEON, MIGUEL

Address: 7586 NW 113 PATH Address: 5584 NW 114 AVE APT 101
City-St-Zip: MEDLEY, FL 33178 City-St-Zip: MIAMI, FL 33178

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: USECHE, JOSE L VP (X) Change ( ) Addition Name: USECHE, JOSE L

Address: 7586 NW 113 PATH Address: 5584 NW 114 AVE APT 101

City-St-Zip: MEDLEY, FL 33178 City-St-Zip: MIAMI, FL 33178

Title: ( ) Delete Title: S ( ) Change (X) Addition

 Name:
 Name:
 ROSAS, ROXANA

 Address:
 Address:
 5584 NW 114 AVE APT 101

City-St-Zip: City-St-Zip: MIAMI, FL 33178

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: MIGUEL LEON P 04/30/2008