2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P07000104691

Entity Name: INTERCAM SECURITIES, INC.

Current Principal Place of Business:

1221 BRICKELL AVENUE
1070
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1221 BRICKELL AVENUE
1070
MIAMI, FL 33131

New Mailing Address:

FEI Number: 45-0573583 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUSSELL C. WEIGEL, III, P.A.
5775 BLUE LAGOON DRIVE
SUITE 100
MIAMI, FL 33126 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

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: SOLORZANO, EDUARDO
Address: 6065 SW 116 STREET
City-St-Zip: MIAMI, FL 33156

Title: DVP ( ) Delete
Name: PACHECO MEYER, JOSE
Address: 1221 BRICKELL AVENUE SUITE 1070
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: LARRANAGA, JOSE MANUEL
Address: 1221 BRICKELL AVENUE SUITE 1070
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: VALENZUELA, CARLOS
Address: 1221 BRICKELL AVENUE SUITE 1070
City-St-Zip: MIAMI, FL 33131

Title: D,S (X) Delete
Name: GABRIEL, GOLZARRI
Address: 1221 BRICKELL AVENUE SUITE 1070
City-St-Zip: MIAMI, FL 33131

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:

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: EDUARDO SOLORZANO PRES 04/29/2009

Electronic Signature of Signing Officer or Director — Date