

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129650

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: TESINCA FIRE & SAFETY, INC.

## Current Principal Place of Business:

104 PONCE DE LEON BLVD  
CORAL GABLES, FL 33135

## New Principal Place of Business:

## Current Mailing Address:

104 PONCE DE LEON BLVD  
CORAL GABLES, FL 33135

## New Mailing Address:

FEI Number: 26-3024269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PESANT, GUILLERMO  
1313 PONCE DE LEON BLVD #301  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

GUTIERREZ, PEDRO  
1313 PONCE DE LEON BLVD #301  
CORAL GABLES, FL 33134 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: PEDRO GUITERREZ

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SEGARRA, RENIEL P  
Address: 9802 HAMMOCKS BLVD APT 204  
City-St-Zip: MIAMI, FL 32196

Title: D ( ) Delete  
Name: MORALES, JORGE L  
Address: 3041 NW 91 ST.  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: GUTIERREZ, PEDRO M  
Address: 104 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL 33135

## 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:

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: PEDRO GUTIERREZ

DIR

03/17/2009

Electronic Signature of Signing Officer or Director

Date