2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001378

Entity Name: KRYPTOIL CORP.

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 19501 WEST COUNTRY CLUB DRIVE 3300 NE 192 ST SUITE 612 **SUITE 1809** AVENTURA, FL 33180 AVENTURA, FL 33180 **Current Mailing Address:** New Mailing Address: 3300 NE 192 ST 19501 WEST COUNTRY CLUB DRIVE SUITE 612 SUITE 1809 AVENTURA, FL 33180 AVENTURA, FL 33180 FEI Number: 26-2373605 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: VALDIVIESO, CARLOS 3300 NE 191 STREET **SUITE 1001** AVENTURA, FL 33180 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROMERO, JUAN ROMERO, JUAN Name: Name: 19501 WEST COUNTRY CLUB DR. (SUITE 612) 3300 NE 192 ST SUITE1809 Address: Address: City-St-Zip: AVENTURA, FL 33180 DA City-St-Zip: AVENTURA, FL 33180 DA VΡ Title: VΡ (X) Change () Addition Title: () Delete Name: LOPEZ, YELINA Name: TORRES, MARIA ESTHER 19501 WEST COUNTRY CLUB DR. (SUITE 612) 3300 NE 192 ST SUITE 1809 Address: Address: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: () Delete Title: Title: () Change () Addition MATA-BRUNI, DAVID Name: Name: 19501 WEST COUNTRY CLUB DR. (SUITE 612) Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: (X) Change () Addition VALDIVIESO, CARLOS J ROMERO, MARIA P Name: Name: Address: 3300 NE 191 STREET (SUITE 1001) Address: 3300 NE 192 ST SUITE 1809 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180

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: JUAN ROMERO P 03/09/2009