

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000031733

Entity Name: SMOWTION CO. CORP.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

10415 NW 41ST STREET
DORAL, FL 33178

New Principal Place of Business:

10305 NW 41ST STREET
STE 219
DORAL, FL 33178

Current Mailing Address:

10415 NW 41ST STREET
DORAL, FL 33178

New Mailing Address:

10305 NW 41ST STREET
STE 219
DORAL, FL 33178

FEI Number: 26-2267847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENTERPRISE RESOURCE PLANNING, INC.
10415 NW 41ST STREET
DORAL, FL 33178 US

Name and Address of New Registered Agent:

ENTERPRISE RESOURCE PLANNING, INC.
10305 NW 41ST STREET
STE 219
DORAL, 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: ENTERPRISE RESOURCE PLANNING, INC.

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALTERINI, ANDRES A
Address: PARAGUAY 2068 6TO PISO A
City-St-Zip: BUENOS AIRES, CF 1121 AR

Title: VP () Delete
Name: PINTO ESCALIER, SANTIAGO
Address: SCALABRINI ORTIZ 3050 4TO PISO
City-St-Zip: BUENOS AIRES, CF 1425 AR

Title: D () Delete
Name: MELITON ELIZARI, MARIANO
Address: ARENALES 3800 18 PISO DPTO G
City-St-Zip: BUENOS AIRES, CF 1425 AR

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: ANDRES A ALTERINI

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date