## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046054

Entity Name: NORTH AMERICA IMAGE TECHNOLOGY CORP.

FILED Apr 30, 2009 Secretary of State

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

19495 BISCAYNE BLVD 19495 BISCAYNE BLVD STE 401 STE 401

AVENTURA, FL 33180 AVENTURA, FL 33180 US

Current Mailing Address: New Mailing Address:

2121 PONCE DE LEON BLVD 2121 PONCE DE LEON BLVD

STE 240 STE 240 COPAL CAPLES

CORAL GABLES, FL 33134 US

FEI Number: 75-3268123 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

PRATS FERNANDEZ & CO PA 2121 PONCE DE LEON BLVD STE 240 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition Name: PEREZ-KRIEB, GABRIEL Name: PEREZ-KRIEB, GABRIEL

Address: 19495 BISCAYNE BLVD STE 401 Address: 19495 BISCAYNE BLVD STE 401
City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 US

Title: PDD ( ) Delete Title: PDD (X) Change ( ) Addition Name: PEREZ-RAMIREZ, ENRIQUE Name: PEREZ-RAMIREZ, ENRIQUE

 Address:
 19495 BISCAYNE BLVD STE 401
 Address:
 19495 BISCAYNE BLVD STE 401

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 AVENTURA, FL 33180 US

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: GABRIEL PEREZ-KRIEB STD 04/30/2009