

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000072144

Entity Name: LANU POS INTL, CORP.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

9440 LIVE OAK PLACE
SUITE # 303
DAVIE, FL 33324 US

New Principal Place of Business:

2800 GLADES CIR
SUITE # 112
WESTON, FL 33327 US

Current Mailing Address:

9440 LIVE OAK PLACE
SUITE # 303
DAVIE, FL 33324 US

New Mailing Address:

2800 GLADES CIR
SUITE # 112
WESTON, FL 33327 US

FEI Number: 26-3093457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, JUAN
9440 LIVE OAK PLACE
SUITE # 303
DAVIE, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIAZ, JUAN
Address: 9440 LIVE OAK PLACE APT # 303
City-St-Zip: DAVIE, FL 33324 US

Title: VP () Delete
Name: FACCHINI, ANGELA
Address: 6831 NW 107 COURT
City-St-Zip: DORAL, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JUAN DIAZ

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date