2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093835

Entity Name: LAW BRAKE SYSTEMS INC.

FILED Sep 10, 2009 Secretary of State

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

1845 NW 112 AVENUE, SUITE 188 1470-E NW 107 AVENUE

MIAMI, FL 33172 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

1845 NW 112 AVENUE, SUITE 188 1470-E NW 107 AVENUE MIAMI, FL 33172 MIAMI, FL 33172

FEI Number: 26-3887969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOURA, WAGNER MOURA, WAGNER 1845 NW 112 AVENUE, SUITE 188 1470-E NW 107 AVENUE MIAMI, FL 33172 MIAMI, FL 33172

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: WAGNER MOURA 09/10/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CUSCHNIR, LEONARDO CUSCHNIR, LEONARDO Name: Name: 1845 NW 112 AVENUE, SUITE 188 Address: 1470-E NW 107 AVENUE Address:

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

() Delete DVT DVT Title: (X) Change () Addition Title: Name: GELBERG, AVRAHAM Name: GELBERG, AVRAHAM

1845 NW 112 AVENUE, SUITE 188 1470-E NW 107 AVENUE Address: Address: MIAMI, FL 33172 City-St-Zip: City-St-Zip: MIAMI, FL 33172

() Delete Title: (X) Change () Addition Title: DS DS

MOURA, WAGNER Name: MOURA, WAGNER Name: 1845 NW 112 AVENUE, SUITE 188 Address: 1470-E NW 107 AVENUE Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

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: WAGNER MOURA D 09/10/2009