## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P15883

Entity Name: METECNO, INC.

FILED Feb 20, 2006 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
725 SUMM DELAND, F	ERHILL DRIV FL 32724	E			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
725 SUMM DELAND, F	ERHILL DRIV FL 32724	E			
FEI Number:	59-2841458	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:					
VEZZA, MF 725 SUMM DELAND, F	ERHILL DRIV	E JS			
The above in the State		submits this statement for the purp	oose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Agent		Date	
Election Carr	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) MORANDI, MAU VIA PER CASS TRIBIANO, IT		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AS ( ) VEZZA, C. 725 SUMMERH DELAND, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFOS ( ) BALAKRISHNA 725 SUMMERH DELAND, FL 3	IILL DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) FORTE, AMEDI VIA PER CASS TRIBIANO, MIL	EO	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FURRER, H	Delete 3 33, POSTFACH 656 CH	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLO VEZZA AS 02/20/2006