2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008
Secretary of State

DOCUMENT# P15883

Entity Name: METECNO, INC.

Current Principal Place of Business:

725 SUMMERHILL DRIVE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

725 SUMMERHILL DRIVE
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-2841458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VEZZA, MR. CARLO
725 SUMMERHILL DRIVE
DELAND, FL 32724 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: PD ( ) Delete
Name: MORANDI, MAURIZIO
Address: VIA PER CASSINO 19
City-St-Zip: TRIBIANO, IT

Title: AS ( ) Delete
Name: VEZZA, C.
Address: 725 SUMMERHILL DRIVE
City-St-Zip: DELAND, FL 32724

Title: CFOS ( ) Delete
Name: BALAKRISHNAN, V.
Address: 725 SUMMERHILL DRIVE
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete
Name: FORTE, AMEDEO
Address: VIA PER CASSINO 19
City-St-Zip: TRIBIANO, MILAN ITALY, IT 20067

Title: D ( ) Delete
Name: FURRER, H
Address: BLEICHERWEG 33, POSTFACH 656
City-St-Zip: ZURICH, CH CH

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORANDI, MAURIZIO
Address: VIA INCISA, 24
City-St-Zip: CORTIGLIONE (ASTI), IT 14040

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FORTE, AMEDEO
Address: VIA INCISA, 24
City-St-Zip: CORTIGLIONE (ASTI), IT 14040

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: AS ( ) Change (X) Addition
Name: CARLO VEZZA - ASST S, ECRETARY
Address: 725 SUMMERHILL DRIVE
City-St-Zip: DELAND, FL 32724

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: CARLO VEZZA AS 03/13/2008

Electronic Signature of Signing Officer or Director — Date