

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17738

FILED  
Jul 10, 2009  
Secretary of State

Entity Name: LAUFEN INTERNATIONAL, INC.

## Current Principal Place of Business:

11190 NW 25TH ST.  
SUITE 100  
MIAMI, FL 33172 US

## New Principal Place of Business:

## Current Mailing Address:

11190 NW 25TH ST.  
SUITE 100  
MIAMI, FL 33172 US

## New Mailing Address:

FEI Number: 73-1139950      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 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

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:

Title: CFOS ( ) Delete  
Name: FERRES, ALFONS  
Address: 11190 NW 25TH ST. ST.,SUITE 100  
City-St-Zip: MIAMI, FL 33172

Title: P ( ) Delete  
Name: LOPEZ, AGUSTIN  
Address: 11190 NW 25TH ST.,SUITE 100  
City-St-Zip: MIAMI, FL 33172

Title: T ( ) Delete  
Name: EVANS, ANDREW J  
Address: 11190 NW 25T ST.,SUITE 100  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change ( ) Addition  
Name: REVERTE, JORDI  
Address: 11190 NW 25TH ST. ST.,SUITE 100  
City-St-Zip: MIAMI, FL 33172

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

Title: T (X) Change ( ) Addition  
Name: FERNANDEZ, MARIELA  
Address: 11190 NW 25T ST.,SUITE 100  
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: JORDI REVERTE

CFO

07/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date