

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P22268

**FILED**  
**Jul 15, 2009**  
**Secretary of State****Entity Name:** OUTINORD UNIVERSAL INCORPORATED**Current Principal Place of Business:**301 WEST 41ST STREET  
SUITE 400-401  
MIAMI BEACH, FL 33140 US**New Principal Place of Business:****Current Mailing Address:**301 WEST 41ST STREET  
SUITE 400-401  
MIAMI BEACH, FL 33140 US**New Mailing Address:****FEI Number:** 13-2915032**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MADRIZ, JOHANNA  
301 WEST 41ST STREET  
SUITE 400-401  
MIAMI BEACH, FL 33140 US**Name and Address of New Registered Agent:**ARIBI, HAMID  
301 WEST 41ST STREET  
SUITE 400-401  
MIAMI BEACH, FL 33140 US

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: ARIBI, HAMID

07/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: ARIBI, HAMID  
Address: 301 WEST 41ST STREET #400-401  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S (X) Delete  
Name: MADRIZ, JOHANNA  
Address: 301 WEST 41ST STREET #400-401  
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: PST (X) Change ( ) Addition  
Name: ARIBI, HAMID  
Address: 301 WEST 41ST STREET #400-401  
City-St-Zip: MIAMI BEACH, FL 33140

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: ARIBI, HAMID

PST

07/15/2009

Electronic Signature of Signing Officer or Director

Date