

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P34626

**FILED**  
**Oct 28, 2008**  
**Secretary of State****Entity Name:** MANUTECH ASSEMBLE, INC.**Current Principal Place of Business:**8181 NW 91ST TERRACE  
BLDG. 10  
MIAMI, FL 33166**New Principal Place of Business:****Current Mailing Address:**8181 NW 91ST TERRACE  
BLDG. 10  
MIAMI, FL 33166**New Mailing Address:****FEI Number:** 98-0072810      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ROMAIN A. MURIEL  
8181 N.W. 91 TERR., BLDG. 10  
MIAMI, FL 33166      US**Name and Address of New Registered Agent:**WAFAY. ALI  
8181 N.W. 91 TERR., BLDG. 10  
MIAMI, FL 33166      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: WAFAY. ALI

10/28/2008

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** D      (X) Delete  
**Name:** KHOZUEE, FARHAD,  
**Address:** #2 RUE DES NIMES  
**City-St-Zip:** PORT-AU-PRINCE,HAITI,**Title:** VCD      (X) Delete  
**Name:** DURBAN, NADIA Y.,  
**Address:** #16 IMP AUBRY  
**City-St-Zip:** PETIONVILLE, HAITI,**Title:** D      (X) Delete  
**Name:** DURBAN, NADIA Y.,  
**Address:** LABOOLE 16 #2  
**City-St-Zip:** PETIONVILLE, HAITI,**Title:** VDS      ( ) Delete  
**Name:** SEYFI, SAMAD,  
**Address:** 8181 NW 91ST TERRACE  
**City-St-Zip:** MIAMI, FL 33166**Title:** PD      ( ) Delete  
**Name:** DURBAN, LANCE P.,  
**Address:** LABOULE 16 #2  
**City-St-Zip:** PETIONVILLE, HAITI,**Title:** VD      (X) Delete  
**Name:** COLON JEAN-EDOUARD,  
**Address:** #2 RUE DES NIMES  
**City-St-Zip:** PORT-AU-PRINCE, HAITI,**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** D      (X) Change ( ) Addition  
**Name:** SEYFI, SAMAD,  
**Address:** 600 WEAVER PARK ROAD  
**City-St-Zip:** LONGMONT, CO 80501**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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: LANCE P. DURBAN

PD

10/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date