2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067183

Entity Name: MATIOK, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

600 GRAPETREE DRIVE, SUTIE 10DN 600 GRAPETREE DRIVE

KEY BISCAYNE, FL 33149 APT 10DN

KEY BISCAYNE, FL 33149

Current Mailing Address: New Mailing Address:

P.O. BOX 490002 7801 NW 37TH ST KEY BISCAYNE, FL 33149 SECTION 1231 / GUA DORAL, FL 33166

FEI Number: 65-0732626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBERST, NORMA T LOWMAN, ROBERT M PA 50 W. MASHTA DR 2730 SW 3RD AVE KEY BISCAYNE, FL 33149 US SUITE 800

EY BISCAYNE, FL 33149 US SUITE 800 MIAMI, FL 33129 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: ROBERT M. LOWMAN 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

GUATEMALA CITY GUATEMALA,

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

GUATEMALA CITY, GU GUATEMALA

Title: D () Delete Title: D (X) Change () Addition
Name: CASTILLO DE MATA, MARIA LUISA
Address: 20 CALLE 4-60 ZONA 10 INT. 3B
City-St-Zip: GUATEMALA CITY GUATEMALA,
CITY-GUATEMALA

Title: D () Delete Title: DR (X) Change () Addition
Name: MATA C. GUILLERMO Name: MATA C. GUILLERMO

 Name:
 MATA C, GUILLERMO
 Name:
 MATA C, GUILLERMO

 Address:
 12 CALLE 6-40 ZONA 9
 Address:
 12 CALLE 6-40 ZONA 9

Title: D () Delete Title: DR (X) Change () Addition

City-St-Zip:

Name: MATA C, ESTUARDO Name: MATA C, ESTUARDO Address: OFICIAN DIAGONAL 6 10-01 ZONA 10 Address: DIAGONAL 6, 10-01 ZONA 10

Address: OFICIAN DIAGONAL 6 10-01 ZONA 10 Address: DIAGONAL 6, 10-01 ZONA 10
City-St-Zip: GUATEMALA CITY GUATEMALA, City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: () Delete Title: MRS (X) Change () Addition MATA DE ARIAS, LUISA MARIA MATA DE ARIAS, LUISA MARIA Name: Name: Address: OFICIAN DIAGONAL 6 10-01 ZONA 10 Address: **DIAGONAL, 6 10-01 ZONA 10** City-St-Zip: City-St-Zip: GUATEMALA CITY GUATEMALA. GUATEMALA CITY, GU GUATEMALA

 Title:
 D
 () Delete
 Title:
 MR
 (X) Change () Addition

 Name:
 MATA C, CARLOS ENRIQUE
 Name:
 MATA C, CARLOS ENRIQUE

 Address:
 7 AV. 5-10 ZONA 4
 Address:
 20 CALLE 6-40 ZONA 10 INT. 3B

City-St-Zip: GUATEMALA CITY GUATEMALA, City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: D () Delete Title: MRS (X) Change () Addition

Name: MATA DE ARROYO, ANA ISABEL Name: MATA, ANA ISABEL Address: 20 CALLE 22-18 ZONA 10 CASA #5 Address: 20 CALLE 6-40 ZONA 10 INT, 3B City-St-Zip: GUATEMALA CITY GUATEMALA, City-St-Zip: GUATEMALA CITY, GU GUATEMALA

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: ESTUARDO MATA C DR 04/24/2009