

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000094505

Entity Name: GRIBAN TECHNOLOGIES, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

11034 W FLAGLER STREET
MIAMI, FL 33174

New Principal Place of Business:

11040 W FLAGLER STREET
MIAMI, FL 33174

Current Mailing Address:

11034 W FLAGLER STREET
MIAMI, FL 33174

New Mailing Address:

11040 W FLAGLER STREET
MIAMI, FL 33174

FEI Number: 65-0956892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUILLON, JOSE
11040 W. FLAGLER ST.
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

GUILLEN, JOSE
11040 W. FLAGLER ST.
MIAMI, FL 33174 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: YOLANDA GUILLEN

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUILLEN, JOSE
Address: 11040 WEST FLAGLER ST
City-St-Zip: MIAMI, FL 33174

Title: PS () Delete
Name: GUILLEN, YOLANDA
Address: 11040 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33174

Title: DS () Delete
Name: GUILLEN, YOLANDA
Address: 11040 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PS (X) Change () Addition
Name: GUILLEN, YOLANDA
Address: 11040 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33174

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: YOLANDA GUILLEN

PS

01/13/2009

Electronic Signature of Signing Officer or Director

Date