

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V71322

FILED
Feb 10, 2009
Secretary of State

Entity Name: CRICON INTERNATIONAL BUSINESS, INC.

Current Principal Place of Business:

6500 NW 54TH CT.
FT LAUDERDALE, FL 33319 US

New Principal Place of Business:

3020 NE 32ND AVENUE
SUITE # 104
FT LAUDERDALE, FL 33308 US

Current Mailing Address:

6500 NW 54TH CT.
FT LAUDERDALE, FL 33319 US

New Mailing Address:

3020 NE 32ND AVENUE
SUITE # 104
FT LAUDERDALE, FL 33308 US

FEI Number: 65-0385054 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JARAMILLO, LESLY P/D
6500 NW 54 CT.
FT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

JARAMILLO, LESLY P/D
3020 NE 32ND AVENUE
SUITE # 104
FT LAUDERDALE, FL 33308 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: LESLY JARAMILLO

02/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: JARAMILLO, LESLY P/D
Address: 6500 NW 54TH CT.
City-St-Zip: FT LAUDERDALE, FL 33319 US

Title: VT () Delete
Name: FLOREZ, OSCAR
Address: 6500 NW 54 CT
City-St-Zip: FORT LAUDERDALE, FL 33319 US

Title: S () Delete
Name: FLOREZ, JOSE R
Address: 6500 NW 54 CT
City-St-Zip: FORT LAUDERDALE, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: JARAMILLO, LESLY P/D
Address: 3020 NE 32ND AVENUE
City-St-Zip: FT LAUDERDALE, FL 33308 US

Title: VT (X) Change () Addition
Name: FLOREZ, OSCAR D
Address: 3020 NE 32ND AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: S (X) Change () Addition
Name: FLOREZ, JOSE R
Address: 3020 NE 32ND AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33308

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: LESLY JARAMILLO

P

02/10/2009

Electronic Signature of Signing Officer or Director

Date