

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 541311

Entity Name: HUMBOLT, INC.

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

4800 RIVIERA DR  
CORAL GABLES, FL 33146 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 14-1832  
CORAL GABLES, FL 331141832 US

## New Mailing Address:

P O BOX 14-1832  
CORAL GABLES, FL 33114 US

FEI Number: 59-1812322

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACHADO, EMILIA C  
4800 RIVIERA DR  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

MACHADO, EMILIA C  
4800 RIVIERA DR.  
CORAL GABLES, FL 33146 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: EMILIA C. MACHADO

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: MACHADO, EMILIA C.,  
Address: 4800 RIVIERA DR.  
City-St-Zip: CORAL GABLES, FL

Title: VT ( ) Delete  
Name: MACHADO, JULIO C.,  
Address: 4800 RIVIERA DR.  
City-St-Zip: CORAL GABLES, F,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: MACHADO, EMILIA C.,  
Address: 4800 RIVIERA DR.  
City-St-Zip: CORAL GABLES, FL 33146

Title: VT (X) Change ( ) Addition  
Name: MACHADO, JULIO C.,  
Address: 4800 RIVIERA DR.  
City-St-Zip: CORAL GABLES, FL 33146

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: EMILIA C. MACHADO

PS

01/15/2009

Electronic Signature of Signing Officer or Director

Date