

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002239

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: QUEPASA CORPORATION

## Current Principal Place of Business:

224 DATURA STREET SUITE 1100  
WEST PALM BEACH, FL 33401

## New Principal Place of Business:

## Current Mailing Address:

224 DATURA STREET SUITE 1100  
WEST PALM BEACH, FL 33401

## New Mailing Address:

FEI Number: 86-0879433      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRIS, MICHAEL D  
1555 PALM BEACH LAKES BLVD SUITE 310  
WEST PALM BEACH, FL 33401      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C      ( ) Delete  
Name: VALDEZ, JEFFREY  
Address: 2129 COLDWATER CANYON  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: DCEO      ( ) Delete  
Name: ABBOTT, JOHN C  
Address: 224 DATURA STREET SUITE 1100  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D      ( ) Delete  
Name: ALONSO, ANCIRA  
Address: C/O GRUPO ACERERO DEL NORTE S.A. DE C.V.  
City-St-Zip: CAMPOS ELISEOS NO 29,   XX

Title: ST      ( ) Delete  
Name: MATTE, MICHAEL D  
Address: 224 DATURA STREET SUITE 1100  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D      ( ) Delete  
Name: JOZOFF, MALCOLM  
Address: 5200 E SOLANO DR  
City-St-Zip: PARADISE VALLEY, AZ 85253

Title: D      ( ) Delete  
Name: SOSA, LIONEL  
Address: 215 RHODE LANE  
City-St-Zip: FLORESVILLE, TX 78114

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

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: MICHAEL MATTE

CFO

04/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date