

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000004674

Entity Name: COMPASS CARRIERS, INC.

FILED
Mar 18, 2009
Secretary of State

Current Principal Place of Business:

2455 EAST SUNRISE BLVD #1103
FT LAUDERDALE, FL 33304

New Principal Place of Business:

2455 E. SUNRISE BLVD., SUITE #1103
FORT LAUDERDALE, FL 33304

Current Mailing Address:

2455 E SUNRISE BLVD #1103
FT LAUDERDALE, FL 33304

New Mailing Address:

2455 E. SUNRISE BLVD., SUITE #1103
FORT LAUDERDALE, FL 33304

FEI Number: 20-2172604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, NATALIE M
1333 NW 87TH AVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

NATALIE M. ADAMS, P.A.
1640 W. OAKLAND PARK BLVD., #303
FORT LAUDERDALE, FL 33311 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: NATALIE M. ADAMS

03/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EKBERG, JONAS
Address: 2455 E SUNRISE BLVD 1103
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP () Delete
Name: KROKSTEDT, PETER
Address: 2455 E SUNRISE BLVD 1103
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S () Delete
Name: HOCKMAN, DON A
Address: 2455 E SUNRISE BLVD STE 1103
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EKBERG, JONAS
Address: 2455 E. SUNRISE BLVD., SUITE #1103
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP (X) Change () Addition
Name: KROKSTEDT, PETER
Address: 2455 E. SUNRISE BLVD., SUITE #1103
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S (X) Change () Addition
Name: HOCKMAN, DON
Address: 2455 E. SUNRISE BLVD., SUITE #1103
City-St-Zip: FORT LAUDERDALE, FL 33304

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: JONAS EKBERG

P

03/18/2009

Electronic Signature of Signing Officer or Director

Date