

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139719

FILED  
Jul 22, 2008  
Secretary of State

Entity Name: COMPREHENSIVE BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

9100 S. DADELAND BLVD, STE 1500  
MIAMI, FL 33156 US

**New Principal Place of Business:**

**Current Mailing Address:**

9100 S. DADELAND BLVD, STE 1500  
MIAMI, FL 33156 US

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

CASTRO, BRIANA  
16275 S W 88TH ST., #122  
MIAMI, FL 33196 US

**Name and Address of New Registered Agent:**

CASTRO, BRIANA  
16275 SW 88 ST  
122  
MIAMI, FL 33196 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: BRIANA CASTRO

07/22/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:                      DIR                      ( ) Delete  
Name:                      CASTRO, BRIANA  
Address:                      16275 S W 88TH ST., #122  
City-St-Zip:                      MIAMI, FL 33196 US

Title:                      P                      ( ) Delete  
Name:                      CASTRO, BRIANA  
Address:                      16275 S W 88TH ST., #122  
City-St-Zip:                      MIAMI, FL 33196 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: BRIANA CASTRO

DIR

07/22/2008

Electronic Signature of Signing Officer or Director

Date