2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000000398

24245 PAINTER DR

LAND O' LAKES, FL 34639

Address: City-St-Zip:

Entity Name: COMPASS POINT VENTURES INC

FILED Jul 09, 2006 Secretary of State

		7.001 01111 12111 01120, 1110.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
14923 BRI TAMPA, F		WNS BLVD. US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
14923 BRI TAMPA, F		WNS BLVD. US			
FEI Number	: 59-3615809	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
501 E. KEI TAMPA, F The above in the State	WHITE, GI NNEDY BL\ L 33602 U named ent e of Florida.		e purpose of changing its registered	office or registered agent, or both,	
SIGNATUI		ronic Signature of Registered A	gent	 Date	
	ce with s. 607	.193(2)(b), F.S., the corporation did cing Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D CHRISLIP, 14923 BRU TAMPA, FL	CE B DOWNS BLVD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	O CHRISLIP, 14923 BRU TAMPA, FL	CE B DOWNS BLVD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	O HOLMES, T	() Delete INA	Title: (Name:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: TINA HOLMES O 07/09/2006