## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006543

Entity Name: COLUSANA, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			N	New Principal Place of Business:		
2500 NW 79 AVE STE 179 MIAMI, FL 33122 US			Al	039 COLL PT #1124 IIAMI BEAC	INS AVE. CH, FL 33140	US
Current Mailing Address:				New Mailing Address:		
2500 NW 79 AVE STE 179 MIAMI, FL 33122 US			Al	6039 COLLINS AVE. APT. 1124 MIAMI BEACH, FL 33140 US		
FEI Number: 8	83-0368358	FEI Number Applied For ( )	FEI Numbe	er Not Applic	cable ( ) C	ertificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
ORTIZ, ALVARO H 10640 SW 96 ST MIAMI, FL 33176 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:						
	Electronic	Signature of Registered Agent	t			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ORTIZ, ALVARO	EY DRIVE, APT A1113	Na Ac	tle: ame: ddress: ty-St-Zip:	( ) Ch	nange ( ) Addition
Title: Name: Address: City-St-Zip:	VP () E ESTAVA, ORLAN 17900 N BAY RD SUNNY ISLES, F	, # 303	Na Ad	ame: Idress:	VP (X) CH ESLAVA, ORLAND 17900 N BAY RD, S SUNNY ISLES, FL	# 303
Title: Name: Address: City-St-Zip:	VP () C REYES, EDWAR 6141 NW 115 PL DORAL, FL 3312	, <b>#</b> 389	Na Ac	tle: ame: ddress: ty-St-Zip:	( ) Ch	nange ( ) Addition
Title: Name: Address: City-St-Zip:	VP () E MADRINAN, ENR 14879 SW 42 ST MIRAMAR, FL 33		Na Ac	tle: ame: ddress: ty-St-Zip:	( ) Ch	nange ( ) Addition
Title: Name: Address: City-St-Zip:	S () C UMANA, CLARA 10640 S.W. 96TH MIAMI, FL 33176		Na Ad	tle: ame: ddress: ty-St-Zip:	( ) Ch	nange ( ) Addition
Title: Name: Address: City-St-Zip:	ORTIZ, MYRIAM	Delete EY DRIVE, APT A1113 I US	Na Ac	ame: Idress:	T (X) CH ORTIZ, MYRIAM 6039 COLLINS AV MIAMI BEACH, FL	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALVARO H. ORTIZ P 04/23/2007