

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F29551

FILED
Apr 28, 2008
Secretary of State

Entity Name: ATTIS CORPORATION

Current Principal Place of Business:

744 10 STREET
APT # 109
MIAMI BEACH, FL 33139

New Principal Place of Business:

742 10 STREET
APT # 109
MIAMI BEACH, FL 33139

Current Mailing Address:

MILLARES & CO.
4649 PONCE DE LEON BLVD., STE. 304
CORAL GABLES, FL 33146

New Mailing Address:

742 10 STREET
APT # 109
MIAMI BEACH, FL 33139

FEI Number: 59-2137941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUANY, ENID S. BUCH
66 VALENCIA AVENUE
APARTMENT 803
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

DUANY, ENID S. BUCH
700 BILTMORE WAY
APARTMENT 501
CORAL GABLES, FL 33134 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:

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUANY, A. DOUGLAS,
Address: 66 VALENCIA AVE. APT 803
City-St-Zip: CORAL GABLES, FL

Title: TD () Delete
Name: DUANY, ENID S. BUCH,
Address: 66 VALENCIA AVE. APT 803
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUANY, A. DOUGLAS,
Address: 744 10TH STREET, #110
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change () Addition
Name: DUANY, ENID S. BUCH,
Address: 700 BALTIMORE WAY APT # 501
City-St-Zip: CORAL GABLES, FL 33134

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: A DOUGLAS DUANY

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date