2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# J02330

Entity Name: COMPU-AID, INC.

Current Principal Place of Business:

102 NE 2ND STREET
037
BOCA RATON, FL 33432 US

New Principal Place of Business:

706 ST. ALBANS DRIVE
BOCA RATON, FL 33486 US

Current Mailing Address:

102 NE 2ND STREET
037
BOCA RATON, FL 33432 US

New Mailing Address:

706 ST. ALBANS DRIVE
BOCA RATON, FL 33486 US

FEI Number: 59-2726549 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDERSON, JOAN PSD
102 NE 2ND STREET
SUITE 037
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

HENDERSON, JOAN PSD
706 ST. ALBANS DRIVE
BOCA RATON, FL 33486 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: 01/11/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: HENDERSON, JOAN PSD
Address: 102 NE 2ND ST. - #037`
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: HENDERSON, JOAN PSD
Address: 706 ST. ALBANS DRIVE
City-St-Zip: BOCA RATON, FL 33486 US

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: JOAN M. HENDERSON PRES 01/11/2009
Electronic Signature of Signing Officer or Director — Date