2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81099

Entity Name: COMO TECHNOLOGIES, INC.

FILED Mar 04, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	GUA PLACE A, FL 34231				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	GUA PLACE A, FL 34231				
FEI Number:	65-0203294	FEI Number Applied For () FEI	Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	of New Registered Agent:	
7232 ANTIC	DERICK J PRES BUA PLACE A, FL 34231	S US			
The above in the State		ibmits this statement for the purpos	se of changing its registere	d office or registered agent, or both,	
SIGNATURE:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTS () E ELIA, FREDERIO 7232 ANTIGUA P SARASOTA, FL	L	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E MAZZENGA, GIA RRD3 BOX 3349 HONESDALE, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C CAINE, M L III 18 INWOOD RD WOODBURY, CT	Delete - 06798	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E ELIA, MARTIN P 1118 MARBLE A CHAPIN, SC 290		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E MAZZENGA, GER VILLA COMO LAKE COMO, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()E MARINI, ANTHON 8B PEMBERWIC GREENWICH, C	K RD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: FREDERICK J ELIA P 03/04/2008