2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18164

FILED Mar 31, 2008 Secretary of State

Entity Name: COMPREHENSIVE RECOVERY SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

712 SE 75TH WAY 5641 SW 36 COURT NORTH FT LAUDERDALE, FL 33068 HOLLYWOOD, FL 33024

Current Mailing Address: New Mailing Address:

5641 SW 36 COURT 712 SE 75TH WAY NORTH FT LAUDERDALE, FL 33068 HOLLYWOOD, FL 33024

FEI Number: 65-0079442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

TAVAREZ, ALISON DIAZ, JESSENIA 712 SE 75TH WAY 5641 SW 36 COURT NORTH FT LAUDERDALE, FL 33068 US HOLLYWOOD, FL 33024 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: JESSENIA DIAZ 03/31/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name:

DIAZ, MICHAEL DIAZ, MICHAEL Name: 4947 N HARBOR ISLE DR Address: 5840 SW 37 AVE Address:

City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: FT LAUDERDALE, FL 33312

Title: VD () Delete Title: VD (X) Change () Addition

DIAZ, JENNIFER Name: DIAZ, JENNIFER Name: Address: 4947 N HARBOR ISLE DR Address: 5840 SW 37 AVE City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: FT LAUDERDALE, FL 33312

Title: () Delete Title: S/D () Change (X) Addition

WEISMAN, DAVID Name: Name:

3530 BISCAYNE BOULEVARD Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33137

() Change (X) Addition Title: () Delete Title: T/D

LEFKOWITZ, JEROME Name: Name: Address: Address: 712 SW 75 WAY City-St-Zip: City-St-Zip: N FT LAUDERDALE, FL 33068

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

SIGNATURE: DAVID WEISMAN S/D 03/31/2008