

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18164

FILED
Apr 26, 2009
Secretary of State

Entity Name: COMPREHENSIVE RECOVERY SERVICES, INC.

Current Principal Place of Business:

5641 SW 36 COURT
HOLLYWOOD, FL 33024

New Principal Place of Business:

712 SW 75 WAY
NORTH LAUDERDALE, FL 33068

Current Mailing Address:

5641 SW 36 COURT
HOLLYWOOD, FL 33024

New Mailing Address:

310 SE 6 STREET
DANIA BEACH, FL 33004

FEI Number: 65-0079442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, JESSENIA
5641 SW 36 COURT
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

DIAZ, JESSENIA
712 SW 75 WAY
NORTH LAUDERDALE, FL 33068 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

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DIAZ, MICHAEL
Address: 5840 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VD () Delete
Name: DIAZ, JENNIFER
Address: 5840 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S/D () Delete
Name: WEISMAN, DAVID
Address: 3530 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: T/D () Delete
Name: LEFKOWITZ, JEROME
Address: 712 SW 75 WAY
City-St-Zip: N FT LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: DIAZ, MICHAEL
Address: 5840 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: V/D (X) Change () Addition
Name: DIAZ, JENNIFER
Address: 5840 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S/D (X) Change () Addition
Name: WEISMAN, DAVID
Address: 5840 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: T/D (X) Change () Addition
Name: LEFKOWITZ, JEROME
Address: 712 SW 75 WAY
City-St-Zip: NORTH 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

04/26/2009

Electronic Signature of Signing Officer or Director

Date