## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P00000046399

Entity Name: CORPWIZ REGISTERED AGENTS, INC.

FILED Jul 30, 2007 Secretary of State

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

8750 NW 36 STREET 8750 NW 36 STREET SUITE 220 SUITE 425 MIAMI, FL 33178 MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

 8750 NW 36 STREET
 8750 NW 36 STREET

 SUITE 220
 SUITE 425

 MIAMI, FL 33178
 MIAMI, FL 33178

FEI Number: 59-3647943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 WERMUTHLAW P. A.
 WERMUTHLAW P. A.

 8750 NW 36 STREET
 8750 NW 36 STREET

 SUITE 220
 SUITE 425

 MIAMI, FL 33178 US
 MIAMI, FL 33178 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: 07/30/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: WERMUTH, ASTRID Name: WERMUTH, ASTRID
Address: 8750 NW 36 STREET, SUITE 220 Address: 8750 NW 36 STREET, SUITE 425

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33178

Title: V ( ) Delete Title: V (X) Change ( ) Addition Name: ROYO. PATRICIA Name: ROYO. PATRICIA

 Name:
 ROYO, PATRICIA
 Name:
 ROYO, PATRICIA

 Address:
 8750 NW 36 STREET, SUITE 220
 Address:
 8750 NW 36 STREET, SUITE 425

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33178

Title: V ( ) Delete Title: V (X) Change ( ) Addition Name: JIMENEZ, MABEL V (X) Change ( ) Addition Name: JIMENEZ, MABEL

Address: 8750 NW 36 STREET, SUITE 220 Address: 8750 NW 36 STREET, SUITE 425

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33178

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: ASTRID WERMUTH PRES 07/30/2007