2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000051172

Address:

City-St-Zip:

Entity Name: ADMINISTRADORA DE SERVICIOS PLANINSA, INC.

FILED Feb 14, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1820 NORTH CORPORATE LAKE BOULEVARD SUITE 202 WESTON, FL 33326				5411 N UNIVERSITY DRIVE SUITE 202 CORAL SRPRINGS, FL 33067		
Current Mailing Address:				New Mailing Address:		
1820 NORTH CORPORATE LAKE BOULEVARD SUITE 202 WESTON, FL 33326				5411 N UNIVERSITY DRIVE SUITE 202 CORAL SRPRINGS, FL 33067		
FEI Number:	: 65-1010733	FEI Number Applied For ()	FEI Nui	mber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
2667 RIVIE	ATO, FELIX ERA MANOR FL 33332	US				
	named entity of Florida.	submits this statement for the p	ourpose o	of changing its registe	ered office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	JUANEDA, SE CALLE YARE) Delete BASTIAN QUINTA VICTORIA SECTOR J Y CARACAS VENEZUELA,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JUANEDA, JO AVENIDA EL S) Delete SE SAMAN EDIFICIO GARD PAL PISO 2 MARQUEZ EDO MIR,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (JUANEDA, AN) Delete TONIO		Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: FELIX IMPOSIMATO GM 02/14/2008

CALLE 15 RESID. MARACAPANA TORRE A PISO 8

APTO 81-A LA URBINA EDO MARI,