

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000047061

FILED
Mar 04, 2008
Secretary of State

Entity Name: ACERBUS CORPORATION

Current Principal Place of Business:

2307 DOUGLAS ROAD
SUITE 400
MIAMI, FL 33145

New Principal Place of Business:

3785 NW 82 AVE.
SUITE 302
DORAL, FL 33166

Current Mailing Address:

2307 DOUGLAS ROAD
SUITE 400
MIAMI, FL 33145

New Mailing Address:

3785 NW 82 AVE.
SUITE 302
DORAL, FL 33166

FEI Number: 65-1102328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IDA C. OVIES, C.P.A., P.A.
2307 DOUGLAS ROAD
SUITE 400
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

IDA C. OVIES, C.P.A., P.A.
3785 NW 82 AVE.
SUITE 302
DORAL, FL 33166 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: IDA C. OVIES, C.P.A., P.A.

03/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAURA MAS, ANTONIO
Address: 2307 DOUGLAS ROAD, SUITE 400
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: SAURA SOTILLOS, JORGE A
Address: 2307 DOUGLAS ROAD, SUITE 400
City-St-Zip: MIAMI, FL 33145

Title: D (X) Delete
Name: SAURA SOTILLOS, LUCIA
Address: 2307 DOUGLAS ROAD, SUITE 400
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SAURA SOTILLOS, JORGE A
Address: 3785 NW 82 AVE. SUITE 302
City-St-Zip: DORAL, FL 33166

Title: D (X) Change () Addition
Name: SAURA SOTILLOS, LUCIA
Address: 3785 NW 82 AVE. SUITE 302
City-St-Zip: DORAL, FL 33166

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUCIA SAURA

D

03/04/2008

Electronic Signature of Signing Officer or Director

Date