

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094924

FILED  
Jan 11, 2005  
Secretary of State

Entity Name: COMM-PASS INTERNATIONAL SERVICES, INC.

## Current Principal Place of Business:

10185 COLLINS AVENUE  
1201  
MIAMI BEACH, FL 33154

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 403655  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 65-1147051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI  
1500 MIAMI CENTER  
201 S. BISCAYNE BLVD.  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: BALESTIERI, MARIA FERNANDA  
Address: 10185 COLLINS AVE., APT. 423  
City-St-Zip: BAL HARBOR, FL 33154

Title: S ( ) Delete  
Name: SINAGRA, EDUARDO D  
Address: 10185 COLLINS AVE., APT. 423  
City-St-Zip: BAL HARBOR, FL 33154

Title: P ( ) Delete  
Name: SINAGRA, ENRIQUE A  
Address: 10185 COLLINS AVE APT 1201  
City-St-Zip: BAL HARBOUR, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ENRIQUE ALEJANDRO SINAGRA

P

01/11/2005

Electronic Signature of Signing Officer or Director

Date