

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000111372

**FILED**  
**Nov 28, 2007**  
**Secretary of State****Entity Name:** CALIGARIS CORP.**Current Principal Place of Business:**4662 NW 69 AVE  
MIAMI, FL 33166**New Principal Place of Business:****Current Mailing Address:**4662 NW 69 AV  
MIAMI, FL 33166**New Mailing Address:****FEI Number:** 01-0576455**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LUZEY, EDIDA OLGA  
4662 NW 69 AVE  
MIAMI, FL 33166 US**Name and Address of New Registered Agent:**LUZEY, MILCHA  
4662 NW 69 AVE  
MIAMI, 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: REYNALDO ALEMAN

11/28/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** EDIDA OLGA LUZEY,  
**Address:** 4662 N W 69 AVE  
**City-St-Zip:** MIAMI, FL 33166**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change ( ) Addition  
**Name:** REYNALDO ALEMAN,  
**Address:** 4662 N W 69 AVE  
**City-St-Zip:** MIAMI, FL 33166

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: REYNALDO ALEMAN

PD

11/28/2007

Electronic Signature of Signing Officer or Director

Date