

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116246

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** EXPANSION CORP.

**Current Principal Place of Business:**

785 CRANDON BLVD  
STE 106  
KEY BISCAVNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

785 CRANDON BLVD  
STE 106  
KEY BISCAVNE, FL 33149

**New Mailing Address:**

**FEI Number:** 71-0915297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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: PD  
Name: NUCETE, MARTA  
Address: 785 CRANDON BLVD #106  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: VPD  
Name: NUCETE, OMAR E  
Address: 785 CRANDON BLVD #106  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: S  
Name: FABREGAS, MIREYA  
Address: 785 CRANDON BLVD #106  
City-St-Zip: KEY BISCAVNE, FL 33149

I hereby 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 all other like empowered.

SIGNATURE: MARTA NUCETE

PD

02/23/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date