

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000007243

FILED
May 01, 2009
Secretary of State

Entity Name: COMPLETE CORPORATE SERVICES, INC.

Current Principal Place of Business:

2223 SW 13 AV
302
MIAMI, FL 33145 US

Current Mailing Address:

2223 SW 13 AV
302
MIAMI, FL 33145 US

New Principal Place of Business:

1680 CORAL WAY
302
MIAMI, FL 33145 US

New Mailing Address:

1680 CORAL WAY
302
MIAMI, FL 33145 US

FEI Number: 20-1069520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLESTAS AND ASSOCIATES, INC.
2223 SW 13 AV
302
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

BALLESTAS AND ASSOCIATES, INC.
1680 CORAL WAY
302
MIAMI, FL 33145 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: A. BALLESTAS, PRES.

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BALLESTAS, ALINA
Address: 2223 SW 13 AV #302
City-St-Zip: MIAMI, FL 33145

Title: SD () Delete
Name: BALLESTAS, ACHILLES
Address: 2223 SW 13 AV #302
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BALLESTAS, ALINA
Address: 1680 CORAL WAY #302
City-St-Zip: MIAMI, FL 33145

Title: SD (X) Change () Addition
Name: BALLESTAS, ACHILLES
Address: 1680 CORAL WAY #302
City-St-Zip: MIAMI, FL 33145

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: ACHILLES BALLESTAS

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05/01/2009

Electronic Signature of Signing Officer or Director

Date