

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098403

FILED
May 03, 2005
Secretary of State

Entity Name: THE COMPASS ADVISORY FIRM, INC.

Current Principal Place of Business:

4000 PONCE DE LEON BLVD.
STE. 470
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4000 PONCE DE LEON BLVD.
STE. 470
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 56-2398887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUIS, ANNYVIES
17079 SW 16 ST.
PEMBROKE PINES, FL 33027 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

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: PVST () Delete
Name: LUIS, ANNYVIES
Address: 17079 SW 16 ST
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANNYVIES LUIS

PVST

05/03/2005

Electronic Signature of Signing Officer or Director

Date