2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051581

Entity Name: COMPREHENSIVE EQUIPMENT MANAGEMENT CORPORATION

FILED Jun 19, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5450 BRUCE B. DOWNS BLVD. #324 5512 7TH STREET

WESLEY CHAPEL, FL 33543 ZEPHYRHILLS, FL 33542

Current Mailing Address: New Mailing Address:

5450 BRUCE B. DOWNS BLVD. #324 5512 7TH STREET

WESLEY CHAPEL, FL 33543 ZEPHYRHILLS, FL 33542

FEI Number: 43-1784109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARRIONUEVO, WALTER
5450 BRUCE B. DOWNS BLVD. #324
WESLEY CHAPEL, FL 33543 US
BARRIONUEVO, WALTER
222 ROSANA DRIVE
BRANDON, FL 33511 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: WALTER BARRIONUEVO 06/19/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: BARRIONUEVO, WALTER Name: BARRIONUEVO, WALTER

 Name:
 BARRIONUEVO, WALTER
 Name:
 BARRIONUEVO, WALTER

 Address:
 5450 BRUCE B. DOWNS BLVD #324
 Address:
 222 ROSANA DRIVE

 City-St-Zip:
 WESLEY CHAPEL, FL 33543
 City-St-Zip:
 BRANDON, FL 33511

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 LEISURE, MARK
 Name:
 LEISURE, MARK

 Address:
 5450 BRUCE B. DOWNS BLVD. 3324
 Address:
 7548 SHANON LANE

 City-St-Zip:
 WESLEY CHAPEL, FL 33543
 City-St-Zip:
 ZEPHYRHILLS, FL 33540

Title: TREA () Delete Title: () Change () Addition

 Name:
 HOSTETTER, POLLY
 Name:

 Address:
 800 W. WASHINGTON
 Address:

 City-St-Zip:
 WAVERLY, MO 64096
 City-St-Zip:

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: WALTER BARRIONUEVO PRES 06/19/2007