

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000116099

Entity Name: COMTRUST INC.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

2999 NE 191ST STREET
601
ADVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

2999 NE 191ST STREET
601
ADVENTURA, FL 33180

New Mailing Address:

FEI Number: 34-2010694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEHLER, STUART
2999 NE 191ST STREET
SUITE 601
ADVENTURA, FL 33180 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: P () Delete
Name: TIMOTHY, REDDING B
Address: 14040 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

Title: D () Delete
Name: MEHLER, STUART A
Address: 2999 NE 191ST STREET, STE 601
City-St-Zip: ADVENTURA, FL 33180

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TIMOTHY, REDDING B
Address: 2999 NE 191ST STREET, STE 601
City-St-Zip: ADVENTURA, FL 33180

Title: D (X) Change () Addition
Name: MEHLER, STUART A
Address: 2999 NE 191ST STREET, STE 601
City-St-Zip: ADVENTURA, FL 33180

Title: D () Change (X) Addition
Name: SELIN, CHARLES J
Address: 2999 NE 191ST STREET
City-St-Zip: ADVENTURA, FL 33180

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: STUART MEHLER

D

04/26/2007

Electronic Signature of Signing Officer or Director

_____ Date