2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046021

Entity Name: COSMOS ENTERPRISES, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

471 N PINE ISLAND RD STE 403D 471 N. PINE ISLAND RD. PLANTATION, FL 33324

403D

PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

471 N. PINE ISLAND RD. 471 N PINE ISLAND RD STE 403D 403D

PLANTATION, FL 33324

PLANTATION, FL 33324

FEI Number: 47-0953731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

QUINTANA, EMILIO QUINTANA, EMILIO 471 N PINE ISLAND RD STE 403D 471 N . PINE ISLAND RD.

PLANTATION, FL 33324 403D

PLANTATION, FL 33324 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: 04/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

QUINTANA, EMILIO QUINTANA, EMILIO Name: Name:

471 N PINE ISLAND RD STE 403D 471 N. PINE ISLAND RD. STE 403D Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324

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

Name: VALVERDE, MILDER Name: VALVERDE, MILDER

471 N PINE ISLAND RD STE 403D 471 N . PINE ISLAND RD. STE 403D Address: Address:

PLANTATION, FL 33324 PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

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

QUINTANA, CAMILO Name: QUINTANA, CAMILO Name:

471 N PINE ISLAND RD STE 403D 471 N. PINE ISLAND RD. STE 403D Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324

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.

Ρ SIGNATURE: EMILIO QUINTANA 04/25/2008