

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112163

FILED
Apr 29, 2007
Secretary of State

Entity Name: COMPLEX SERVICES INTERNATIONAL INC.

Current Principal Place of Business:

2655 LE JEUNE RD.
STE. 500
CORAL GABLES, FL 33114

New Principal Place of Business:

2655 S. LE JEUNE RD.
STE. 500
CORAL GABLES, FL 33134

Current Mailing Address:

2655 LE JEUNE RD
STE. 500
CORAL GABLES, FL 33144

New Mailing Address:

2655 S. LE JEUNE RD
STE. 500
CORAL GABLES, FL 33134

FEI Number: 20-3295194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINE, MIGUEL
9353 FONTAINEBLEAU BLVD.
APT. A215
MIAMI, FL 33172 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: DP () Delete
Name: QUINE PENA, MIGUEL
Address: 9353 FONTAINEBLEAU BLVD #A215
City-St-Zip: MIAMI, FL 33172

Title: DV () Delete
Name: VAN DE HOVE, ERIC
Address: CRA 100 #11-60 TRADE CTR OF 506
City-St-Zip: CALI, CO COLOMBIA CO

Title: DT () Delete
Name: ARGOTE, BLANCA
Address: 9353 FONTAINEBLEAU BLVD #A215
City-St-Zip: MIAMI, FL 33172

Title: DS () Delete
Name: CHAVES, JOSE F
Address: CRA 100 #11-60 TRADE CTR OF 506
City-St-Zip: CALI, CO COLOMBIA CO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: VAN DE HOVE, ERIC
Address: AVE. 10 DE MAYO VIA PANCE U. SAN B/VENTURA
City-St-Zip: CALI, CO COLOMBIA CO

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: CHAVES, JOSE F
Address: AVE 10 DE MAYO VIA PANCE U. SAN B/VENTURA
City-St-Zip: CALI, CO COLOMBIA CO

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: MIGUEL QUINE

DP

04/29/2007

Electronic Signature of Signing Officer or Director

Date