

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000056070

**FILED**  
**Aug 07, 2007**  
**Secretary of State**

**Entity Name:** COLLAZOS CONSULTING SERVICES, INC.

**Current Principal Place of Business:**

9600 SW 46 TERR  
MIAMI, FL 33165

**New Principal Place of Business:**

16751 NE 9 AVE  
412  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

9600 SW 46 TERR  
MIAMI, FL 33165

**New Mailing Address:**

16751 NE 9 AVE  
412  
NORTH MIAMI BEACH, FL 33162

**FEI Number:** 20-4747209

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLAZOS, BLAS D  
9600 SW 46 TERR  
MIAMI, FL 33165 US

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

COLLAZO, BLAS D  
16751 NE 9 AVE  
412  
NORTH MIAMI BEACH, FL 33162 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: BLAS DANILO COLLAZO

08/07/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: COLLAZOS, BLAS D  
Address: 9600 SW 46 TERR  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: RODRIGUEZ COLLAZOS, MAIPU  
Address: 9600 SW 46 TERR  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: COLLAZO, BLAS D  
Address: 16751 NE 9 AVE #412  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP (X) Change ( ) Addition  
Name: RODRIGUEZ COLLAZO, MAIPU  
Address: 16751 NE 9 AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: BLAS DANILO COLLAZO

P

08/07/2007

Electronic Signature of Signing Officer or Director

Date