2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000085158

Entity Name: PIPSA INTERNATIONAL CORPORATION

FILED Feb 21, 2007 Secretary of State

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

1290 WESTON RD - STE 306 Q-6 18501 PINES BLVD. UNIT 201 WESTON, FL 33326 PEMBROKE PINES, FL 33029

Current Mailing Address: New Mailing Address:

1290 WESTON RD - STE 306 Q-6 18501 PINES BLVD. UNIT 201 WESTON, FL 33326 PEMBROKE PINES, FL 33029

FEI Number: 20-5101982 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:

GBS CONSULTANTS, INC. GBS CONSULTANTS, INC. 18501 PINES BLVD. 1290 WESTON RD **UNIT 201** STE 306

WESTON, FL 33326 US PEMBROKE PINES, FL 33029 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: JORGE FERNANDEZ 02/21/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SANCHEZ, PABLO T SANCHEZ, PABLO T Name: Name: 1290 WESTON RD - STE 306 Q-6 18501 PINES BLVD. UNIT 201 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: PEMBROKE PINES, FL 33029

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

GONZALEZ, JOSE V Name: GONZALEZ, JOSE V Name:

1290 WESTON RD - STE 306 Q-6 18501 PINES BLVD. UNIT 201 Address: Address: WESTON, FL 33326 PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip:

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

PONCE, CARLOS R PONCE, CARLOS R Name: Name: 1290 WESTON RD - STE 306 Q-6 18501 PINES BLVD, UNIT 201 Address: Address:

City-St-Zip: WESTON, FL 33326 City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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: PABLO SANCHEZ PTD 02/21/2007

Electronic Signature of Signing Officer or Director

Date