

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 02, 2008
Secretary of State**

DOCUMENT# P06000143518

Entity Name: WAYRA CORPORATION

Current Principal Place of Business:

3245 VIRGINIA STREET
SUITE 39
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

3245 VIRGINIA STREET
SUITE 39
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 20-5898535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRADO, JAVIER
3245 VIRGINIA STREET
39
COCONUT GROVE, FL 33133 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

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PRADO, JAVIER
Address: 3245 VIRGINIA STREET, SUITE 39
City-St-Zip: COCONUT GROVE, FL 33133

Title: DVS () Delete
Name: BRAVO, CLAUDIA
Address: 3245 VIRGINIA STREET, SUITE 39
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: PRADO, MARISOL
Address: 603 WOODGATE LANE
City-St-Zip: SUNRISE, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: PRADO, JAVIER
Address: 3245 VIRGINIA STREET, SUITE 39
City-St-Zip: COCONUT GROVE, FL 33133

Title: VP (X) Change () Addition
Name: BRAVO, CLAUDIA
Address: 3245 VIRGINIA STREET, SUITE 39
City-St-Zip: COCONUT GROVE, FL 33133

Title: CEO (X) Change () Addition
Name: ESLAVA, DIANA A
Address: 3245 VIRGINIA STREET, SUITE 39
City-St-Zip: COCONUT GROVE, FL 33133

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: JAVIER PRADO

Electronic Signature of Signing Officer or Director

P/T

10/02/2008

Date