2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000012064

Entity Name: COMPRASUS INC.

FILED May 01, 2008 Secretary of State

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

43 TRUMAN DR. 6511 NOVA DRIVE WESTON, FL 33326 #123

DAVIE, FL 33317

Current Mailing Address: New Mailing Address:

43 TRUMAN DR. 6511 NOVA DRIVE PMB #123

WESTON, FL 33326 PMB #123 DAVIE, FL 33317

FEI Number: 20-8391012 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:

AGUIRRE, CARLOS E
43 TRUMÁN DR.
WESTON, FL 33266 US
AGUIRRE, CARLOS E
6431 NW 82 AVE
MIAMI, FL 33166 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: CARLOS E. AGUIRRE 05/01/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 MARQUEZ, GIORELSY M

 Address:
 43 TRUMAN DR.

 City-St-Zip:
 WESTON, FL 33326

 Title:
 VP
 () Delete

 Name:
 AGUIRRE, CARLOS E

 Address:
 43 TRUMAN DR.

 City-St-Zip:
 WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARQUEZ, GIORELSY M
Address: 6511 NOVA DRIVE, PMB #123

City-St-Zip: DAVIE, FL 33317

Title: VP (X) Change () Addition

Name: AGUIRRE, CARLOS E Address: 6431 NW 82 AVE City-St-Zip: MIAMI, FL 33166

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: GIORELSY M. MARQUEZ P 05/01/2008