# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 04, 2008**
**Secretary of State**

DOCUMENT# P07000090701

**Entity Name:** VIRTUELLE, INC.

**Current Principal Place of Business:**

2332 GALIANO AVE
2ND FL
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2332 GALIANO AVE
2ND FL
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number: 26-0708874** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

BODET, MARCUS G
800 DOUGLAS RD SUITE 105
CORAL GABLES, FL 33134 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: DPST ( ) Delete
Name: MAWAD, VANESSA
Address: 2332 GALIANO AVE 2ND FL
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: MAWAD, SUSANA
Address: 2332 GALIANO AVE 2ND FL
City-St-Zip: CORAL GABLES, FL 33134

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

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

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

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: VANESSA MAWAD DPST 08/04/2008

Electronic Signature of Signing Officer or Director — Date