2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000123059

Address:

City-St-Zip:

Entity Name: COIMPEX CORPORATION

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	STA PINES C' ERS, FL 3390					
Current Mailing Address:			New Mailir	New Mailing Address:		
	STA PINES C' ERS, FL 3390					
FEI Number: 26-1407293 FI		FEI Number Applied For ()	FEI Number Not Applicable ()		Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
1100 S FE	SE CORPORA DERAL HWY LD BEACH, FL	SECOND FLOOR				
	named entity of Florida.	submits this statement for the	purpose of changing it	s registered	d office or registered agent, or bot	h,
SIGNATUR	RE:					
	Electro	nic Signature of Registered A	gent		Date	_
		3(2)(b), F.S., the corporation did g	not receive the prior notice	э.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	NIETO, CESAF	PINES CT STE 404	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	() Delete	Title: Name:	VP MULLER, NA	() Change (X) Addition	

Address:

City-St-Zip:

13502 SIESTA PINES CT STE 404 FORT MYERS, FL 33908

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: CESAR NIETO PD 05/01/2008