2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063143

Address:

City-St-Zip:

9990 NW 14 ST., STE. 110

MIAMI, FL 33172

INICINITY DETDOLELIM OFDVIOCO CODD

FILED Apr 28, 2009 Secretary of State

Entity Nar	me: INFINITY	PETROLEUM SERVICES COM	KP.		
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
9990 NW 14 ST., STE. 110 MIAMI, FL 33172			9990 NW 14 STREE SUITE 110 MIAMI, FL 33172		
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
9990 NW 14 ST., STE. 110 MIAMI, FL 33172			9990 NW 14 STREET SUITE 110 MIAMI, FL 33172		
FEI Number:	26-2908559	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
	ADOLFO E. 128 ST., STE 33186 US		IGLESIAS, ADOLFO 12060 SW 129 CT SUITE 104 MIAMI, FL 33186 U		
	named entity e of Florida.	submits this statement for the p	urpose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE:			04/28/2009	
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP (DE LA ROSA, 9990 NW 14 S MIAMI, FL 33	T., STE. 110	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP (SANCHEZ, LU 12025 SW 43 MIAMI, FL 33	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CASAS NINO,	3-66 OFICINA 303	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T (GONZALEZ, C) Delete AMILO	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JUAN C. DE LA ROSA DP 04/28/2009