

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095597

FILED
Apr 30, 2009
Secretary of State

Entity Name: COMERPOLIS, CORP.

Current Principal Place of Business:

4995 NW 72 AVE SUITE 205
MIAMI, FL 33166

New Principal Place of Business:

14353 FREDRICKSBURG DR
APT 909
ORLANDO, FL 32837

Current Mailing Address:

4995 NW 72 AVE SUITE 205
MIAMI, FL 33166

New Mailing Address:

14353 FREDRICKSBURG DR
APT 909
ORLANDO, FL 32837

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCANO, OSWALDO G
14353 FREDRICKSBURG DR APT #909
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

GONZALEZ, OSWALDO J
14353 FREDRICKSBURG DR
APT 909
ORLANDO, FL 32837 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: OSWALDO GONZALEZ

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SEGOVIA, EDGAR G
Address: 4995 NW 72 AVE SUITE 205
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: MARCANO, OSWALDO G
Address: 14353 FREDRICKSBURG DR APT 909
City-St-Zip: ORLANDO, FL 32837

Title: S () Delete
Name: RANDET, KAREN G
Address: 4995 NW 72 AVE SUITE 205
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, EDGAR O
Address: 4995 NW 72 AVE SUITE 205
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change () Addition
Name: GONZALEZ, OSWALDO J
Address: 14353 FREDRICKSBURG DR APT 909
City-St-Zip: ORLANDO, FL 32837

Title: S (X) Change () Addition
Name: GONZALEZ, KAREN O
Address: 4995 NW 72 AVE SUITE 205
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: OSWALDO GONZALEZ

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date