

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000003131

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** COMPREHENSIVE LOAN SOLUTIONS, INC.

**Current Principal Place of Business:**

9765 SW 15 STREET  
MIAMI, FL 33174

**New Principal Place of Business:**

2665 S. BAYSHORE DR.  
605  
MIAMI, FL 33133

**Current Mailing Address:**

9765 SW 15 STREET  
MIAMI, FL 33174

**New Mailing Address:**

2665 S. BAYSHORE DR.  
605  
MIAMI, FL 33133

**FEI Number:** 27-1645958

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

VILLARREAL, CAROS E  
9765 SW 15 STREET  
MIAMI, FL 33174 US

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

VILLARREAL, LAUREN M  
9765 SW 15 STREET  
MIAMI, FL 33174 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:** LAUREN VILLARREAL

03/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** VILLARREAL, LAUREN M  
**Address:** 9765 SW 15 STREET  
**City-St-Zip:** MIAMI, FL 33174

I hereby 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 all other like empowered.

**SIGNATURE:** LAUREN VILLARREAL

P

03/28/2012

Electronic Signature of Signing Officer or Director

Date