

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000045139

FILED
Apr 09, 2007
Secretary of State

Entity Name: COM-STALLERS U.S.A., INC.

Current Principal Place of Business:

1202 SW 17TH ST
SUITE 101
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

1202 SW 17TH ST
SUITE 101
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 59-3378028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALL, DAN
1202 SW 17TH ST
SUITE 101
OCALA, FL 34474 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCALL, DAN
Address: 1202 SW 17TH STREET, SUITE 101
City-St-Zip: Ocala, FL 34474

Title: VP () Delete
Name: MCCALL, JAKY
Address: 1202 SW 17TH STREET, SUITE 101
City-St-Zip: Ocala, FL 84474

Title: VP () Delete
Name: MCCALL, DAN
Address: 1202 SW 17TH STREET, SUITE 101
City-St-Zip: Ocala, FL 34474

Title: T () Delete
Name: MCCALL, DAN
Address: 1202 SW 17TH STREET, SUITE 101
City-St-Zip: Ocala, FL 34474

Title: S () Delete
Name: MCCALL, DAN
Address: 1202 SW 17TH STREET, SUITE 101
City-St-Zip: Ocala, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DAN MCCALL

P

04/09/2007

Electronic Signature of Signing Officer or Director

_____ Date