2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000059370

Entity Name: COMIN, CORP

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4775 N.W. 72 AVENUE MIAMI, FL 33166 US **Current Mailing Address: New Mailing Address:** PO BOX 66-8795 MIAMI, FL 33166 US FEI Number: 65-0769135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZAMBRANA, MARIA CECILIA 4775 NW 72 AVE. MIAMI, FL 33166 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ZAMBRANA, MARIA CECILIA Name: Name: 4775 NW 72 AVE. Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: Title: (X) Change () Addition () Delete CASTEDO, CARLOS EDUARDO VPD Name: MERCADO, EDUARDO S VPD Name: 4775 NW 72 AVE. 2333 BERING DRIVE APTO# 330 Address: Address: MIAMI, FL 33166 HOUSTON, TX 77057 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition CASTEDO, JUAN PABLO TR Name: Name: 4775 NW 72 AVE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33166 Title: () Delete Title: () Change (X) Addition CASTEDO, HERNAN MARIO DT Name: Name: Address: Address: 2333 BERING DRIVE APTO# 330 City-St-Zip: City-St-Zip: HOUSTON, TX 77057

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: MARIA CECILIA ZAMBRANA PD 04/30/2007