2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2006 8:00 am **Secretary of State DOCUMENT # P98000090930** 05-02-2006 90159 003 ***158.75 1. Entity Name COMUNDI INTERNATIONAL CORPORATION Principal Place of Business Mailing Address <u>ተ</u>ብበለ ነ ነ ነ ነ ነ ነ 7330 NW 12TH ST 7330 NW 12TH ST MIAMI, FL 33126 US SUITE 108 MIAMI, FL 33126 115 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-0876769 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAURA C. SHARPE ZEDAN, GADALA Street Address P. N. Dox 12 The STREET SUITE 201 7330 NW 12 ST. **SUITE 108** MIAMI, FL 33126 MIAMI City 8. 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. I am familiar with, and accept the obligations of distered agent. LAURA C. SHARPE 04/27/06 SIGNATURE. ped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE X Delete TITLE ☐ Change Addition ZEDAN, GADALA NAME NAME CHARUR, CARLOS R. STREET ADDRESS 7330 NW 12TH ST STREET ADDRESS 7330 NW 12th STREET SUITE 201 CITY-ST-ZIP MIAMI, FL 33126 CITY-ST-ZIP MIAMI, FL. 33126 TITLE ☐ Delete Change TITLE Addition DAHBURA, ALBERTO NAME DAHBURA, ALBERTO NAME 7330 NW 12th STREET SUITE 201 STREET ADDRESS 10740 SW 118 PLACE STREET ADDRESS MIAMI, FL. 33126 MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-7IP VΡ TITLE Defete TITLE ☐ Change X Addition ZEDAN, GUILLERMO A NAME NAME ZEDAN, LUIS STREET ADDRESS 9245 SW 118TH TERRACE STREET ADDRESS 7330 NW 12th STREET SUITE 201 CITY-ST-7IP MIAMI, FL 33176 CITY-ST-7/P MIAMI, FL. 33126 ☐ Delete TITLE TITLE ☐ Change x☐ Addition D, S CHARUR, ELIAS A JR NAME NAME CHARUR, CARLOS R. JR. STREET ADDRESS 10953 NW 48 LANE STREET ADDRESS 11332 SW 97th AVE. CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-ZIP MIAMI, FL. 33176 ☐ Change X☐ Addition TITLE Delete TITLE CHARUR, JORGE 7330 NW 12th STREET NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL. 33126 TITLE ☐ Delete TITLE K) Change ☐ Addition D, VP NAME NAME CHARUR, ELIAS A. JR. STREET ADDRESS STREET ADDRESS 7330 NW 12th STREET SUITE 201 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL. 33126 12. Thereby certify that the information symbolic with this filing does not qualify for the exemptions contained 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 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 by execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

LAURA C. SHARPE 04/27/2006 <u>(305) 459</u>-4070 SIGNATURE: Daytime Phone # SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with

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her like empowered.

ALLACHMENT 40077781

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1) COMUNDI INTERNATIONAL CORP	ORATION

	Document # P98000090930
	Principal Address
	7330 NW 12th Street
	Suite 108
	Miami FL 33126
6)	Name of New Registered Agent
-	SHARPE, LAURA
	7330 NW 12th Street

Mailing Address 7330 NW 12th Street Suite 108 Miami FL 33126

4) FIN Number 65-0876769

10)

Miami FL 33126

Title	D		x_Additions
Name	CHARUR	ELIAS	
Street Address	7330 NW 12th Street		
City -St - Zip	Miami FL 33126		
Tillo	D, P		x Additions
Title	PEREIRA	RAFAEL	, todisono
Name	7330 NW 12th Street	TOT ALL	
Street Address			
City -St - Zip	Miami FL 33126		
Title			Additions
Name			
Street Address			
City -St - Zip			

12) I hereby certify that the information supplied with this fling does not qualify for the exceptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this supplemental report is true and accurate and that my 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 in Block 11 if changed, or an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAURA SHARPE