2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036737

Entity Name: CORRUS CORPORATION

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13913 ALAMANDA AVE 816 NE 5TH STREET

MIAMI, FL 330142562 US HALLANDALE BEACH, FL 33009 US

Current Mailing Address: New Mailing Address:

13913 ALAMANDA AVE 816 NE 5TH STREET

MIAMI, FL 330142562 US HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0913249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GULISANO, JOSE MARTA VALVERDE, INC. 13913 ALAMANDA AVE 816 NE 5TH STREET

MIAMI, FL 330142562 US HALLANDALE BEACH, FL 33009 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: MARTA VALVERDE 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GULISANO, JOSE L
 Name:
 GULISANO, JOSE L

 Address:
 13913 ALAMANDA AVE
 Address:
 816 NE 5TH STREET

City-St-Zip: MIAMI LAKES, FL 330142562 City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VD () Delete Title: VD (X) Change () Addition

Name: GULISANO, MONICA L
Address: 13913 ALAMANDA AVE
Name: GULISANO, MONICA L
Address: 816 NE 5TH STREET

City-St-Zip: MIAMI LAKES, FL 330142562 City-St-Zip: HALLANDALE BEACH, FL 33009

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: JOSE L. GULISANO PD 04/29/2009