2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000105670

1. Entity Name SERVIXPRESS, INC.



FILED
May 01, 2007 08:00 A
Secretary of State

CR2E034 (11/05)

Principal Place of Business

2601 WEST 2ND AVENUE #7 HIALEAH, FL 33010

Mailing Address

2601 WEST 2ND AVENUE #7 HIALEAH, FL 33010



DO NOT WRITE IN THIS SPACE 04242007

4. FEI Number Applied For 11-3657861 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MESA, ELADIO 2601 WEST 2ND AVENUE #7 HIALEAH, FL 33010

DO NOT WRITE IN THIS SPACE

No Chg-P

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 registered agent.					
J	Eladio Mesa	PresideNT	, <u> </u>	5 my	4-26-07
SIGNATURE_	Signature, typed or printed name of registered agent and title it			required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution.			9 🗆	\$5.00 May Be	
After Ma	ay 1, 2007 Fee will be \$550.00	rrust rund Contribution.		Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE	D	·			
NAME	MESA, ELADIO				
STREET ADDRESS	2601 WEST 2ND AVENUE #7				
CITY-ST-ZIP	HIALEAH, FL 33010				
TITLE	V				
NAME	MESA, CARMEN J				
STREET ADDRESS	2601 WEST 2ND AVE. #7				
CFTY-ST-ZIP	HIALEAH, FL 33010				
TITLE	T				
NAME	MESA, JAVIER				
STREET ADDRESS	2601 WEST 2ND AVE.			D0	NOT WOITE
CITY-ST-ZIP	HIALEAH, FL 33010			DO	NOT WRITE
TITLE				IAI -	TUIC CDACE
NAME				11.7	THIS SPACE
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CITY-ST-ZIP					
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NAME					U00000749944
STREET ADDRESS					05/18/07-80043-011 150.00
CITY-ST-ZIP					
TITLE		,			•
NAME					
STREET ADDRESS		1			
CLTY-ST-ZIP		1			
12. I hereby certify that the information supplied 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 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					