2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 23, 2007 08:00 All Secretary of State **DOCUMENT # P05000035122** 1. Entity Name TAVÉX AMERICA, INC. Principal Place of Business Mailing Address 1860 N ATLANTIC AVE B703 1860 N ATLANTIC AVE B703 COCOA BEACH, FL 32931 US COCOA BEACH, FL 32931 04192007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 04-3267868 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZAHAYKEVICH, GEORGE DO NOT WRITE 1860 N ATLANTIC AVE B703 COCOA BEACH, FL 32931 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signalure, typed or printed name of registered agent and tile if applicable, (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550,00 10. OFFICERS AND DIRECTORS PTCD TITLE NAME ZAHAYKEVICH, GEORGE 1860 N ATLANTIC AVE B703 STREET ADDRESS CITY-ST-ZIP COCOA BEACH, FL 32931 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADORESS CITY-ST-ZIP 000000723736 05/02/07-80083-012 158.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 propowered.

NAME OF SIGNING OPPIOER OR DIRECTOR