2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000006177

1. Entity Name

THE GENESIS GROUP INTERNATIONAL, INC.



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

Principal Place of Business

PATE OF DUSINESS

9970 CENTRAL PARK BLVD. S., SUITE 200 BOCA RATON, FL 33428

Mailing Address

9970 CENTRAL PARK BLVD. S., SUITE 200 BOCA RATON, FL 33428



DO NOT WRITE IN THIS SPACE

04282007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

65-0992401

5. Certificate of Status Desired

Not Applicable

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALLAN H. FUHR 9970 CENTRAL PARK BLVD. S., SUITE 200 BOCA RATON, FL 33428 DO NOT WRITE 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 Florida.	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FUHR, LINDA E 9970 CENTRAL PARK BLVD. S., SUITE 200 BOCA RATON, FL 33428	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BORTNICK, BERNARD 9970 CENTRAL PARK BLVD. S., SUITE 200 BOCA RATON, FL 33428	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD FUHR, ALLAN 9970 CENTRAL PARK BLVD. SUITE 200 BOCA RATON, FL 33428	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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DO NOT WRITE IN THIS SPACE

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 justee 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/48/07

561-812-9966

Daytime Phone #