

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# M44029

Entity Name: INVEX CORPORATION

**FILED**  
**Feb 22, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

C/O 283 CATALONIA AVE.  
2ND FLOOR  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

7416 S.W. 48 STREET  
POMPANO BEACH, FL 33068

**New Mailing Address:**

8401 SW 19 ST  
NORTH LAUDERDALE, FL 33068

FEI Number: 59-2783346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIAMI CORPORATE SYSTEMS, INC  
283 CATALONIA AVENUE  
2ND FLOOR  
CORAL GABLES, FL 33134 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DS ( ) Delete  
Name: DESJACQUES, JEAN-PIE, RRE  
Address: % 283 CATALONIA AVENUE 2ND FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title: PDS ( ) Delete  
Name: ROSANNE, WRIGHT  
Address: 8401 SW 19 ST  
City-St-Zip: POMPAÑO BEACH, FL 33068

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DS (X) Change ( ) Addition  
Name: ABASCAL, LORENZO  
Address: % 283 CATALONIA AVENUE 2ND FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title: PDS (X) Change ( ) Addition  
Name: ROSANNE, WRIGHT  
Address: 8401 SW 19 ST  
City-St-Zip: NORTH LAUDERDALE, FL 33068

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSANNE WRIGHT

PDS

02/22/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date