

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017553

Entity Name: REIVAX CORP.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

10365 S.W. 96 TERR.
MIAMI, FL 33172

New Principal Place of Business:

10365 S.W. 96 TERR.
MIAMI, FL 33176

Current Mailing Address:

9600 NW 25TH ST.
MIAMI, FL 33172

New Mailing Address:

10365 S.W. 96 TERR.
MIAMI, FL 33176

FEI Number: 65-0982823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INTRIAGO, XAVIER
10365 SW 96 TERR
MIAMI, FL 33176 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: INTRIAGO, XAVIER
Address: 10365 S.W. 96 TERR.
City-St-Zip: MIAMI, FL 33176

Title: VSTD () Delete
Name: INTRIAGO, DIANA
Address: 10365 S.W. 96 TERR.
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: INTRIAGO, GIOVANNI
Address: 10365 SW 96 TERR
City-St-Zip: MIAMI, FL 33176

Title: TR () Delete
Name: INTRIAGO, PAOLA
Address: 10365 SW 96 TERR
City-St-Zip: MIAMI, FL 33176 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: XAVIER INTRIAGO P.

PSD

04/07/2005

Electronic Signature of Signing Officer or Director

Date