2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2005
Secretary of State

DOCUMENT# P03000091368

Entity Name: GENESYS MEDIA, INC.

Current Principal Place of Business:

1043 NW 99 STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1043 NW 99 STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 05-0583661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAMPHILE, CASSANDRA
1043 NW 99 STREET
MIAMI, FL 33150 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CASTILLO, JORGE
Address: 13899 BISCAYNE BLVD. SUITE 224
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: JOSEPH, MIKE
Address: 13899 BISCAYNE BLVD. SUITE 224
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: REYES, ALEXANDER
Address: 13899 BISCAYNE BLVD. SUITE 224
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: PAMPHILE, CASSANDRA
Address: 1043 NW 99 STREET
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: GIL, ANDERSON
Address: 13899 BISCAYNE BLVD. SUITE 224
City-St-Zip: MIAMI, FL 33181

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:

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: MIKE JOSEPH D 09/05/2005

Electronic Signature of Signing Officer or Director Date