## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000019673

Entity Name: FYVEX INTERNATIONAL CORP.

18125 SW 148 AVE RD

MIAMI, FL 33187

Address:

City-St-Zip:

FILED May 04, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
18125 SW 148 AVE RD					ITARY TRA	JL	
MIAMI, FL	33187			#10 WEST PAL	M BEACH,	FL 33415	
Current Mailing Address:				New Mailing Address:			
	148 AVE RD		2450 S MILITARY TRAIL				
MIAMI, FL 33187				#10 WEST PALM BEACH, FL 33415			
FEI Number	: 30-0379800	FEI Number Applied For ( )	FEI Nur	nber Not Appl	icable ( )	Certificate of Status	Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
GARCIA, CHRISTY 18125 SW 148 AVE RD MIAMI, FL 33187 US				FIGUEROA, CHRISTY 2450 S MILITARY TRAIL #10 WEST PALM BEACH, FL 33415 US			
	e named entity e of Florida.	submits this statement for the	e purpose o	f changing i	ts registered	d office or registered a	gent, or both,
SIGNATURE: CHRISTY FIGUEROA						05/04/2007	
	Electro	nic Signature of Registered A	gent			Date	
		93(2)(b), F.S., the corporation diding Trust Fund Contribution ( ).	not receive t	he prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	P ( FIGUEROA, A 18125 SW 14 MIAMI, FL 33	8 AVE RD		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VELLOJIN, TA DIAGONAL 17	) Delete NRO S 17 #65-73 CONJUNTO SAN FELIPE NARIA, BOGOTA COL,		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	VELLOJIN, AN DIAGONAL 17	) Delete IGELO 17 #65-73 CONJUNTO SAN FELIPE VARIA, BOGOTA COL,		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name:	S ( GARCIA, CHR	) Delete ISTY		Title: Name:	S FIGUEROA,	(X) Change ( ) Addition CHRISTY	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

18125 SW 148 AVE RD

MIAMI, FL 33187

SIGNATURE: CHRISTY FIGUEROA S 05/04/2007