

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000072742

Entity Name: XVX CORPORATION

FILED  
Jun 08, 2007  
Secretary of State

**Current Principal Place of Business:**

4441 18TH PLACE S.W.  
NAPLES, FL 34116

**New Principal Place of Business:**

1906 40TH TERR. SW  
NAPLES, FL 34116

**Current Mailing Address:**

4441 18TH PLACE S.W.  
NAPLES, FL 34116

**New Mailing Address:**

1906 40TH TERR. SW  
NAPLES, FL 34116

FEI Number: 20-1097688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INTRIAGO, EDGAR-JOEL  
4441 18TH PLACE S.W  
NAPLES, FL 34116 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: CEO ( ) Delete  
Name: INTRIAGO, EDGAR-JOEL  
Address: 4441 18TH PLACE S.W.  
City-St-Zip: NAPLES, FL 34116

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

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

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.

SIGNATURE: EDGAR-JOEL INTRIAGO

CEO

06/08/2007

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

\_\_\_\_\_  
Date