2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075292

Entity Name: CREDEXIM CORPORATION

FILED Mar 14, 2008 Secretary of State

Entity Nai	me: CREDEX	IM CORPORATION						
Current Principal Place of Business:				New Principal Place of Business:				
13390 SW 128 STREET MIAMI, FL 33186				11980 SW 144 COURT SUITE 202 MIAMI, FL 33186				
Current Mailing Address:				New Mailing Address:				
13390 SW 128 STREET MIAMI, FL 33186				11980 SW 144 COURT SUITE 202 MIAMI, FL 33186				
FEI Number:	: 20-1101437	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certifica	nte of Status D	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
LOZANO, TEMISTOCLES E 15348 SW 111 STREET MIAMI, FL 33196 US				LOZANO, TEMISTOCLES E 13895 SW 84 STREET MIAMI, FL 33183 US				
	named entity e of Florida.	submits this statement for the	purpose o	f changing i	ts registered	office or r	egistered ag	ent, or both,
SIGNATURE:				03/14/2008				
	Electror	nic Signature of Registered Ac	gent				Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () BOCCARA, DA 8368 SW 152 / MIAMI, FL 331	AVENUE		Title: Name: Address: City-St-Zip:	() Change(() Addition	
Title: Name: Address: City-St-Zip:	VP (LOZANO, TEM 15348 SW 111 MIAMI, FL 331	STREET		Title: Name: Address: City-St-Zip:	VP (LOZANO, TEM 13895 SW 84 MIAMI, FL 33	STREET		
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	VP (GONZALEZ, L 8368 SW 152 MIAMI, FL 33	AVENUE	(X) Addition	

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: TEMIS LOZANO VP 03/14/2008