

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90033 009 \*\*\*150.00

<b>DOCUMENT # P04000130047</b> 1. Entity Name <b>GENESIS SOUTH, INC.</b>			
Principal Place of Business <b>2805 E OAKLAND PARK BLVD #448 FT LAUDERDALE, FL 33306 US</b>		Mailing Address <b>2805 E OAKLAND PARK BLVD #448 FT LAUDERDALE, FL 33306 US</b>	
2. Principal Place of Business <b>409</b>		3. Mailing Address <b>409</b>	
Suite, Apt. #, etc. <b>SE 16<sup>th</sup> SE COURT</b>		Suite, Apt. #, etc. <b>SE 16<sup>th</sup> SE COURT</b>	
City & State <b>FORT LAUDERDALE FL</b>		City & State <b>FORT LAUDERDALE FL</b>	
Zip <b>33316</b>		Zip <b>33316</b>	
Country <b>U.S.</b>		Country <b>U.S.</b>	
4. FEI Number <b>20-1640870</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>PISONI, MATTHEW 2805 E OAKLAND PARK BLVD FT LAUDERDALE, FL 33306</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) <b>409 SE 16<sup>th</sup> SE COURT City FORT LAUDERDALE FL Zip Code 33316</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>MATTHEW PISONI</b> <span style="float: right;">02/09/06</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PISONI, MATTHEW 2805 E OAKLAND PARK BLVD #448 FT LAUDERDALE, FL 33306	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Additic
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with another like empowered.			
SIGNATURE <b>MATTHEW PISONI</b>		Date <b>02/03/06</b> Daytime Phone # <b>954-568-9900</b>	