

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146712

FILED
Feb 20, 2007
Secretary of State

Entity Name: MED-PHENIX INC.

Current Principal Place of Business:

2655 SHIPSTON AVE
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

2020 SEVEN SPRINGS BLVD
SUITE B
NEW PORT RICHEY, FL 34655 US

Current Mailing Address:

2655 SHIPSTON AVE
NEW PORT RICHEY, FL 34655 US

New Mailing Address:

2020 SEVEN SPRINGS BLVD.
SUITE B
NEW PORT RICHEY, FL 34655 US

FEI Number: 20-3720153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GANUZA, MARGIE T
2655 SHIPSTON AVE
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

JOHNSON, WHITNEY M
2020 SEVEN SPRINGS BLVD.
SUITE B
NEW PORT RICHEY, FL 34655 US

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: WHITNEY JOHNSON

02/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GANUZA, CARLOS
Address: 2655 SHIPSTON AVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: DVT (X) Delete
Name: GANUZA, MARGIE
Address: 2655 SHIPSTON AVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GANUZA, CARLOS
Address: 2020 SEVEN SPRINGS BLVD. SUITE B
City-St-Zip: NEW PORT RICHEY, FL 34655 US

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 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: CARLOS GANUZA

DP

02/20/2007

Electronic Signature of Signing Officer or Director

Date