## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000018837

City-St-Zip:

MIAMI, FL 33169

FILED Feb 28, 2007 Secretary of State

Entity Nan	ne: GENECIS INC.			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
600 NW 210 ST STE #101 MIAMI, FL 33169		600 NW 210 ST 101 MIAMI, FL 33169		
Current M	ailing Address:	New Mailing Address:	New Mailing Address:	
600 NW 210 ST STE #101 MIAMI, FL 33169		600 NW 210 ST 101 MIAMI, FL 33169		
FEI Number:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
ERRAR, GREGORY 600 NW 210 ST STE #101 MIAMI, FL 33169 US		ERRAR, GREGORY 600 NW 210 ST STE 101 MIAMI, FL 33169 US	600 NW 210 ST STE 101	
The above in the State	named entity submits this statement for the of Florida.	ne purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: GREGORY ERRAR DP		02/28/2007	
	Electronic Signature of Registered	Agent	Date	
Election Can	npaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) Delete ERRAR, GREGORY 600 NW 210 ST STE #101 MIAMI, FL 33169	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	DS () Delete ERRAR, FARAH 600 NW 210 ST STE #101 MIAMI, FL 33169	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	DT () Delete MAITLAND, DANIEL 600 NW 210 ST STE #101	Title: ( Name: Address:	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: GREGORY ERRAR DP 02/28/2007