## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000073415

FILED Jan 05, 2007 Secretary of State

Entity Na	me: SPHINX	VENTURE GROUP, INC.			•		
Current F	rincipal Plac	e of Business:	New Principal Place of Business:				
	NSHIRE DRIV CHAPEL, FL						
Current N	lailing Addre	ss:	New Mailing Address:				
PO BOX 4 TAMPA, F							
FEI Number	El Number: 20-4966914 FEI Number Applied For ( )		FEI Number Not Appl	icable ( )	Certificate of Status Desired (X)		
Name and	d Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:		
1290 WES	ISULTANTS, I STON ROAD, , FL 33326	SUITE 306					
	e named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both	,	
SIGNATU	RE:						
Electronic Signature of Registered Agent			ent	Date			
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	MANZINEZ, LO 1313 LYONSH		Title: Name: Address: City-St-Zip:	MANZINEZ, L 1313 LYONS			
Title:	PTD (	) Delete	Title:	VSP	(X) Change ( ) Addition		

Name: MORALES, IRIA Name: DROZCO, ANDREINA N 1313 LYONSHIRE DR Address: 1313 LYONSHIRE DR Address:

WESLEY CHAPEL, FL 33543 WESLEY CHAPEL, FL 33543 City-St-Zip: City-St-Zip:

Title: ( ) Change (X) Addition Title: ( ) Delete TRS

Name: Name: MANZINEZ, LOURDES C Address: Address: 1313 LYONSHIRE DRIVE City-St-Zip: City-St-Zip: WESLEY CHAPEL, FL 33543

Title: () Delete Title: DRCT ( ) Change (X) Addition

MANZINEZ, LOURDES C Name: Name: Address: Address: 1313 LYONSHIRE DRIVE WESLEY CHAPEL, FL 33543 City-St-Zip: 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: LOURDES MANZINEZ PTD 01/05/2007