

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000079404

Entity Name: EQUINAMICS, CORP.

FILED
Mar 26, 2007
Secretary of State

Current Principal Place of Business:

1390 S DIXIE HWY
1306
CORAL GABLES, FL 33146 US

Current Mailing Address:

1390 S DIXIE HWY
1306
CORAL GABLES, FL 33146 US

FEI Number: 65-0645475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIEVANO, JUAN J
1390 S DIXIE HWY
STE 1306
CORAL GABLES, FL 33146 US

New Principal Place of Business:

9130 S DADELAND BLVD
1602
MIAMI, FL 33156 US

New Mailing Address:

9130 S DADELAND BLVD
1602
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

LIEVANO, JUAN J
9130 S DADELAND BLVD
1602
MIAMI, FL 33156 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: JUAN J LIEVANO

03/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: LIEVANO, JUAN J
Address: 1390 S. DIXIE HWY #1306
City-St-Zip: MIAMI, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: LIEVANO, JUAN J
Address: 9130 S DADELAND BLVD STE 1602
City-St-Zip: MIAMI, FL 33156

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: JUAN J LIEVANO

D/P

03/26/2007

Electronic Signature of Signing Officer or Director

Date