2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000078030

Title:

Name:

Address:

City-St-Zip:

FILED Apr 13, 2007 Secretary of State

Entity Nam	ne: MEXICO IN	NVESTMENTS, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
3802 CORF TAMPA, FL	POREX PARK [. 33619 US	DRIVE				
Current Mailing Address:			New Ma	New Mailing Address:		
3802 CORPOREX PARK DR TAMPA, FL 33619 US			ATTN:	3802 CORPOREX PARK DR ATTN: JANEY HENDERSON TAMPA, FL 33619 US		
FEI Number:	59-3433851	FEI Number Applied For ()	FEI Number Not A	pplicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 US						
The above in the State		ubmits this statement for the pu	rpose of changir	g its registered	d office or registered agent, or both,	
SIGNATURE:						
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S ()E MILLSTONE, RO 3802 CORPORA TAMPA, FL 3361	TE PARK DRIVE	Title: Name: Address: City-St-Zi	3802 CORP	(X) Change ()Addition ATHAN C SECRETA OREX PARK DRIVE 33619 US	
Title: Name: Address: City-St-Zip:	PD () [DETTER, GERAL 3802 CORPORE TAMPA, FL 3361	X PK DR	Title: Name: Address: City-St-Zi	3802 CORP	(X) Change ()Addition ERALD L PRESIDE OREX PK DR 33619 US	
Title: Name: Address: City-St-Zip:	T ()E PAGE, TIMOTHY 3802 CORPORA TAMPA, FL 3361	TE PARK DRIVE	Title: Name: Address: City-St-Zi	3802 CORP	(X) Change ()Addition DTHY B TREASUR OREX PARK DRIVE 33619 US	

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.

Title:

Name:

Address:

City-St-Zip:

EVP

ENZOR, GARY R EVP

TAMPA, FL 33619 US

3802 CORPOREX PARK DRIVE

() Change (X) Addition

SIGNATURE: JANEY HENDERSON, CORPORATE PARALEGAL CP

() Delete