

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000006923

Entity Name: MACROTRENZ CORP.

FILED  
May 06, 2007  
Secretary of State

## Current Principal Place of Business:

12534 CORMORANT DR.  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

## Current Mailing Address:

2050 KIMBERLY DR  
DUNEDIN, FL 34698

## New Mailing Address:

12534 CORMORANT DRIVE  
JACKSONVILLE, FL 32223

FEI Number: 59-3489015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCIVER, GEARY M  
12534 CORMORANT DR.  
JACKSONVILLE, FL 32223 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCIVER, GEARY M  
Address: 12534 CORMORANT DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: ST ( ) Delete  
Name: MCIVER, LORI  
Address: 12534 CORMORANT DR  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GEARY M. MCIVER

P

05/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date