2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000017691

Entity Name: GRAPHX ENGINEERING, INC

FILED Apr 07, 2005 Secretary of State

		EIVOIVEEIVIIVO, IIVO.					
Current Pi	rincipal Place	of Business:	New Pri	New Principal Place of Business:			
SUITE B	BISCUS BLVD NE, FL 32901						
	ailing Addres		New Ma	New Mailing Address:			
SUITE B	BISCUS BLVD						
FEI Number:	59-3494607	FEI Number Applied For ()	FEI Number Not A	oplicable ()	Certificate of Status Desire	ed ()	
Name and	Address of C	f New Registered Agent:					
301 E. PINI P O BOX 5	R, RICHARD E STREET, SI 40919 D, FL 3285409						
	named entity : of Florida.	submits this statement for th	ne purpose of changin	g its registere	d office or registered agent,	or both,	
SIGNATUF	RE:						
	Electror	ic Signature of Registered	Agent		Date		
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	WALTER, JOH	CUS BLVD, STE B	Title: Name: Address: City-St-Zip	:	() Change () Addition		
Title: Name: Address: City-St-Zip:	WALTER, JOH	CUS BLVD, STE B	Title: Name: Address: City-St-Zip	1696 W. HIE	(X) Change () Addition ATHERINE B BISCUS BLVD SUITE B IE, FL 32901		
Title: Name: Address: City-St-Zip:	WALTER, CATH	CUS BLVD STE B	Title: Name: Address: City-St-Zip	:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CATHERINE B. WALTER DTS 04/07/2005