

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 20, 2005
Secretary of State**

DOCUMENT# P98000017691

Entity Name: GRAPHX ENGINEERING, INC.

Current Principal Place of Business:

1696 WHIBISCUS BLVD
SUITE B
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1696 WHIBISCUS BLVD
SUITE B
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3494607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITAKER, RICHARD
301 E. PINE STREET, SUITE 150
P O BOX 540919
ORLANDO, FL 328540919 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WALTER, JOHN T
Address: 1696 W HIBISCUS BLVD, STE B
City-St-Zip: MELBOURNE, FL 32901

Title: DTS () Delete
Name: WALTER, CATHERINE B
Address: 1696 W. HIBISCUS BLVD SUITE B
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: WALTER, JOHN T
Address: 1696 W HIBISCUS BLVD, STE B
City-St-Zip: MELBOURNE, FL 32901

Title: DVT (X) Change () Addition
Name: WALTER, CATHERINE B
Address: 1696 W. HIBISCUS BLVD SUITE B
City-St-Zip: MELBOURNE, FL 32901

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

DVT

10/20/2005

Electronic Signature of Signing Officer or Director

_____ Date