


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # P98000042750 1. Entity Name GUIXCO, INC.	
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Principal Place of Business 5800 NW 32ND CT. MIAMI, FL 33147	Mailing Address C/O IVAN A GOMEZ, P.A. 601 BRICKELL KEY DR. 507 MIAMI, FL 33131
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03182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0855056	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent IAG CORPORATE SERVICES, INC 601 BRICKELL KEY DR STE 507 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUIXENS, JUAN J 5800 NW 32ND CT. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GUIXENS, JUAN J JR. 5800 NW 32ND CT. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GUIXENS, MANUEL J 5800 32ND CT. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MAURY, CHRISTINA 5800 NW 32ND CT. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000724180 05/02/07-80101-018 158.75</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> JUAN J. GUIXEN, President	4/18/2007 Date	1305.371.9213 Daytime Phone #
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