## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000101342

Title:

Name: Address:

City-St-Zip:

VPD

TAWIL, RAHMÉ A

CLERMONT, FL 34715

19621 CR 455

() Delete

Entity Name: GENEXIS INDUSTRIAL CORP.

FILED Apr 19, 2007 Secretary of State

Entity Nan	1e: GENEXIST	NDUSTRIAL CORP.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	JNTY RD 455 T, FL 34715	US				
Current Mailing Address:			New Mailii	New Mailing Address:		
	JNTY RD 455 T, FL 34715	US				
FEI Number:	65-0965456	FEI Number Applied For()	FEI Number Not Appli	cable ( ) Certific	cate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	CLIMACO JNTY RD 455 T, FL 34715	US				
The above in the State		bmits this statement for the pur	rpose of changing it	s registered office or	registered agent, or both,	
SIGNATUR						
Electronic Signature of Registered Agent  Election Campaign Financing Trust Fund Contribution ( ).			t		Date	
	AND DIRECT	· ·	ADDITION	S/CHANGES TO OF	FICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ( ) Delete PIZARRO, CLIMACO J 19621 COUNTRY RD 455 D: CLERMONT, FL 34715		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD () C AZCARATE, MAR 750 POST LAKE APOPKA, FL 327	PLACE	Title: Name: Address: City-St-Zip:	SD (X) Change AZCARATE, MARCELA 3332 ROBERT TRENT ORLANDO, FL 32835	ONES UNIT 207	
Title: Name: Address: City-St-Zip:	TD () D DE PIZARRO, LIE 943 WOLF CREE CLERMONT, FL	K ST	Title: Name: Address: City-St-Zip:	TD (X) Change TAWIL, RAHME 19621 COUNTY ROAD 4 CLERMONT, FL 34715	e ( ) Addition	

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:

SIGNATURE: CLIMACO PIZARRO PD 04/19/2007

() Change () Addition