

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001706

FILED
Mar 05, 2009
Secretary of State

Entity Name: PORT NEXUS CORPORATION

Current Principal Place of Business:

1336 NORTH FEDERAL HWY, #1
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1336 NORTH FEDERAL HWY, #1
POMPANO BEACH, FL 33062

New Mailing Address:

3416 SPRING ST.
POMPANO BEACH, FL 33062

FEI Number: 83-0435010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MONIKA
1700 NW NORTH RIVER DR. #804
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

JONES, MONIKA
3416 SPRING ST.
POMPANO BEACH, FL 33062 US

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: M JONES

03/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JONES, STEVEN
Address: 1700 NO. RIVER DRIVE #804
City-St-Zip: MIAMI, FL 33125

Title: DT () Delete
Name: JONES, MONIKA
Address: 1700 NO. RIVER DRIVE #804
City-St-Zip: MIAMI, FL 33125

Title: D () Delete
Name: AYNILIAN, NICK
Address: 477 COLONIAL ROAD
City-St-Zip: RIDGEWOOD, NJ 07450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JONES, STEVEN
Address: 3416 SPRING ST.
City-St-Zip: POMPANO BEACH, FL 33062

Title: DT (X) Change () Addition
Name: JONES, MONIKA
Address: 3416 SPRING ST.
City-St-Zip: POMPANO BEACH, FL 33062

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: M JONES

COO

03/05/2009

Electronic Signature of Signing Officer or Director

Date