

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** 

P00000029351

## FILED May 14, 2003 8:00 am Secretary of State

04-23-2003 90164 041 \*\*\*150.00

1. Entity Nar	TENXIA INC.							556403	72	
4905 BELFOF SUITE 110 JACKSONVILI			Mailing Address 4905 BELFORT ROAD SUITE 110 JACKSONVILLE FL 32256  3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	CHECK HERE IF MAKING CHANGES			
City & Sta	te		City & State			4.	4. FEI Number 59-3637161 Applied Fo Not Applied			
Žip		country	Zip	Coun	try	<u>L_</u>	Certificate of Status Desired—	\$8,75 Ac	lditional ed	
<u> </u>	6. Name and	Address of Current F	Registered Agent		Name	7.	Name and Address of New Register	ed Agent		
	FORT ROAD					Idress (P.O. E	Box Number is Not Acceptable)			
SUITE 110 Jacksonville FL 32256					City FL Zip Code				ie	
signature	Signature, typed or price Signature, typed or t		nd title if applicable. (N			registered ag	gent, or both, in the State of Florida. 1  onstating)  DA  9. Election Campaign Financing Trust Fund Contribution.	··· \$5.0	OO May Be d to Fees	
10.		OFFICERS AND D	DIRECTORS	11.	-	AC	ODITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
NAME STREET ADDRESS CHY-ST-ZIP	D MOHAN, USHĀ 212 BOBOLINĶ PLACE JACKSONVILLE FL 32259		□ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition S	
TITUE NAME STREET ADDRESS CITY-ST-ZIP	D DO		☐ Delete	NAME STREE	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition &	
NAME STREET ADDRESS CITY-ST-ZIP	Delete CLARKSON, CHARLES A 961 PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32082				ET ADDRESS ST-ZIP	-		Change	— Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D Coelete DEMETREE, CHRIS 10595 OLD ALABAMA RD CONNECTOR #21 ALPHARETTA GA 30005				E TAY  RET ADDRESS  1-ST-ZIP  TAY  TAY  TAY  TAY  TAY  TAY  TAY  TA		Demetree box 47050 conville, FL 32247-	Change	Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Defete					Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>-</u>		☐ Delete ·	CITY-	T ADORESS ST-ZIP			Change	☐ Addition	
12. I hereby of indicated	ertify that the info	rmation supplied with the	his filing does not qualify in the and the	for the exen	nption state	d in Section 1	119.07(3)(i), Florida Statutes. I further of	certify that the in	nformation or director	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is 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:

SUPPLURE REQUIRED
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oate

Daytime Phone #

allachment 55040372 11P00000029351

May12, 2003

Florida Department of State Division of Corporations, Annual Reports Section PO Box 1500 Tallahassee, Florida 32302

Reference Number **P00000029351** Subject: **Intelligenxia**, **Inc.** 

## Officers and Directors List

Mohan, Usha Chief Operating Officer

Mohan, Ren Chief Executive Office

Clarkson, Charles Chairman, Board of Directors

Demetree, Jay Director