

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029542

Entity Name: SEPHIX, INC.

FILED  
May 13, 2008  
Secretary of State

**Current Principal Place of Business:**

2000 N. HIBISCUS DR.  
NORTH MIAMI, FL 331812350

**New Principal Place of Business:**

1468 25TH ST  
UNIT 205  
SAN FRANCISCO, CA 94107

**Current Mailing Address:**

2000 N. HIBISCUS DR.  
NORTH MIAMI, FL 331812350

**New Mailing Address:**

1468 25TH ST  
UNIT 205  
SAN FRANCISCO, CA 94107

FEI Number: 26-0061351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARISTA, EDUARDO R ESQ.  
2655 LE JEUNE RD., FIFTH FLOOR  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HAZBUN, ROBERT M  
Address: 2000 N. HIBISCUS DR.  
City-St-Zip: NORTH MIAMI, FL 331812350

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: HAZBUN, ROBERT M  
Address: 1468 25TH ST UNIT 205  
City-St-Zip: SAN FRANCISCO, CA 94107

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: ROBERT M HAZBUN

D

05/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date