2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021190

Entity Name: ANX LABS INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
91 PINE FOREST PL. APOPKA, FL 32712			
Current Mailing Address:		New Mailing Address:	
91 PINE FOREST PL. APOPKA, FL 32712			
FEI Number: 20-4307786	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
RPOWN IOSHI			

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:

91 PINE FOREST PL. APOPKA, FL 32712

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: P (X) Change () Addition Name: BROWN, JOSH L BROWN, JOSH L

 Name:
 BROWN, JOSH L
 Name:
 BROWN, JOSH L

 Address:
 91 PINE FOREST PL.
 Address:
 91 PINE FOREST PL.

 City-St-Zip:
 APOPKA, FL 32712 US
 City-St-Zip:
 APOPKA, FL 32712 US

 Name:
 SASSEN, DAVID R
 Name:
 SASSEN, DAVID R

 Address:
 9036 SUMMIT CENTRE, APT. 303
 Address:
 4617 SIDEREAL DR

 City-St-Zip:
 ORLANDO, FL 32810 US
 City-St-Zip:
 AUSTIN, TX 78728 US

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: JOSH BROWN P 04/25/2007