

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000897

**Entity Name:** SPHERENIX CORP**Current Principal Place of Business:**1065 E. BROADWAY ST.  
SUITE 5  
OVIEDO, FL 32765**Current Mailing Address:**1065 E. BROADWAY ST.  
SUITE 5  
OVIEDO, FL 32765 US**FEI Number:** 47-2951840**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALENTIN ORTIZ, GILBERTO  
1065 E. BROADWAY ST.  
SUITE 5  
OVIEDO, FL 32765 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title P, T  
Name VALENTIN ORTIZ, GILBERTO  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

Title CFO  
Name AYBAR, DANNY  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

Title V  
Name AYBAR, RANDY  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

Title CEO  
Name TORRES, DIANA  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

Title O  
Name AYBAR, ARIEL  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

Title COO  
Name AYBAR, MARIO  
Address 1065 E. BROADWAY ST.  
SUITE 5  
City-State-Zip: OVIEDO FL 32765

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GILBERTO VALENTIN ORTIZ**PRESIDENT****05/02/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date