

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000100157

**Entity Name:** FX1 INC.

**Current Principal Place of Business:**

815 PONCE DELEON BLVD  
SUITE P209  
CORAL GABLES, FL 33134

**Current Mailing Address:**

815 PONCE DELEON BLVD  
SUITE P209  
CORAL GABLES, FL 33134 US

**FEI Number:** 45-3855065

**Certificate of Status Desired:** No

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

PAULY, CLEMENS WESQ  
815 PONCE DELEON BLVD, SUITE P-209  
CORAL GABLES, FL 33134 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 PSTD  
Name TASKIN, OSMAN  
Address 620 LAUREL LANE WEST  
City-State-Zip: PEMBROKE PINES FL 33027

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

**SIGNATURE:** OSMAN TASKIN

CEO

01/14/2014

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date