2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 170113

Entity Name: AAXICO SALES INC

KORTH, VALÈRIE

MIAMI, FL 33152

8881 N.W. 13TH TERRACE

Name:

Address:

City-St-Zip:

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
8881 N.W. MIAMI, FL	. 13TH TERR. 33152	ACE			
Current Mailing Address:			New Mailing Address:		
8881 N.W. PO BOX 5 MIAMI, FL		ACE			
FEI Number	: 59-0678849	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:		
1500 SAN SUITE 125	G, DENNIS REMO AVE 5 ABLES, FL 3	3146 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	onic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (KORTH, JAME 8881 N.W. 13 MIAMI, FL 33	TH TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (KORTH, WILL 8881 N.W. 13 MIAMI, FL 33	TH TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (KORTH, THOI 8881 N.W. 13 MIAMI, FL 33	TH TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	BD () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: THOMAS A. KORTH STD 03/20/2009