

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 193194

Entity Name: TAWIX, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

2656 NE 27TH TERRACE  
C/O R.B. WILLIAMS  
FT. LAUDERDALE, FL 33306

## New Principal Place of Business:

## Current Mailing Address:

2656 NE 27TH TERRACE  
C/O R.B. WILLIAMS  
FT. LAUDERDALE, FL 33306

## New Mailing Address:

FEI Number: 59-0778158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS,R BROWN  
2656 NE 27TH TERRACE  
FORT LAUDERDALE, FL 33306      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: BARNES, LORI WILLIAM  
Address: 717 BRECKENRIDGE DR.  
City-St-Zip: PORT ORANGE, FL

Title: STD ( ) Delete  
Name: WILLIAMS,EDNA L  
Address: 2656 NE 27TH TERR.  
City-St-Zip: FORT LAUDERDALE, FL

Title: P ( ) Delete  
Name: WILLIAMS, R. B  
Address: 2656 N.E. 27TH TERRACE  
City-St-Zip: FT. LAUDERDALE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: WILLIAMS, EDNA L  
Address: 2656 NE 27TH TERR.  
City-St-Zip: FORT LAUDERDALE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: EDNA L. WILLIAMS

STD

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date