

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 539233

FILED
Feb 10, 2005
Secretary of State

Entity Name: NANEX SYSTEMS CORPORATION

Current Principal Place of Business:

3123 SUSAN DR
CRESTVIEW, FL 32536 US

New Principal Place of Business:

Current Mailing Address:

870 WINDRIVER DR
SYKESVILLE, MD 21784 US

New Mailing Address:

FEI Number: 59-1770952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FREED, A.NNA M DR
3123 SUSAN DRIVE
CRESTVIEW, FL 32536 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: P () Delete
Name: FREED, ANNA-MARIA
Address: 870 WINDRIVER DRIVE
City-St-Zip: SYKESVILLE, MD 21784

Title: VP () Delete
Name: FREED, JASON A
Address: 13830 COOLEY RD
City-St-Zip: PRINCESS ANN, MD 21853

Title: S/T () Delete
Name: FREED, H.
Address: 13830 COOLEY ROAD
City-St-Zip: PRINCESS ANNE, MD 21853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREED, ANNA MARIA
Address: 870 WINDRIVER DRIVE
City-St-Zip: SYKESVILLE, MD 21784

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

Title: S/T (X) Change () Addition
Name: FREED, HELEN M
Address: 13830 COOLEY ROAD
City-St-Zip: PRINCESS ANNE, MD 21853

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANN FREED

P

02/10/2005

Electronic Signature of Signing Officer or Director

_____ Date