

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004533

Entity Name: LUXON WIRELESS INC.

FILED
Apr 02, 2007
Secretary of State

Current Principal Place of Business:

234 PELICAN PLACE
#6
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1465
FORT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 20-0201864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORTNEY, BRIAN W II
P.O. BOX 1465
FORT WALTON BEACH, FL 32549 US

Name and Address of New Registered Agent:

GORTNEY, BRIAN W II
234 PELICAN PLACE
DESTIN, FL 32541 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: BRIAN W GORTNEY, II

04/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: GORTNEY, BRIAN W II
Address: PO BOX 1465
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: DST () Delete
Name: CARUSO, KAREN M
Address: 8102 WADEBRIDGE CIRCLE
City-St-Zip: HUNTINGTON BEACH, CA 92646

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN W. GORTNEY, II

PCD

04/02/2007

Electronic Signature of Signing Officer or Director

Date