## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006247

Entity Name: NEXANT, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
101 SECON	ND STREET, 1 CISCO, CA 9	IOTH FLOOR			
Current Mailing Address:			New Mailing Address:		
	ND STREET, 1 CISCO, CA 9				
FEI Number: 94-3342927 FEI Number Applied For (		FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
1200 SOUT PLANTATIO	ORATION SYS TH PINE ISLAN DN, FL 33324 named entity s	ND ROAD US	rpose of changing its regist	ered office or registered agent, or both,	
in the State	of Florida.				
SIGNATUR		i- Cianatura at Daniatana d Assa	1	Data	
Election Cam		ic Signature of Registered Agen	Ţ	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SARANDAH, BA 101 SECOND S	Delete SEM Y TREET, 10TH FLOOR O, CA 941053672	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	HARTZ, SCOTT 101 SECOND S		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MILLER, PREST	Delete TON R JR TREET, 10TH FLOOR CO, CA 941053672	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () GUPTA, ARJUN 101 SECOND S SAN FRANCISC		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	MONIZ, ERNES 101 SECOND S	Delete T TREET, 10TH FLOOR O, CA 941053672	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ALSAC, ONGUN 101 SECOND S	Delete I TREET, 10TH FLOOR O, CA 941053672	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: DEBORAH RIMMLER VP 04/22/2009