

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002106

Entity Name: LEXCEL SOLUTIONS, INC.

FILED  
Apr 18, 2010  
Secretary of State

**Current Principal Place of Business:**

4110 N. SCOTTSDALE RD., SUITE 360  
SCOTTSDALE, AZ 85251

**New Principal Place of Business:**

**Current Mailing Address:**

4110 N. SCOTTSDALE RD., SUITE 360  
SCOTTSDALE, AZ 85251

**New Mailing Address:**

FEI Number: 86-0796565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD  
Name: KUBITZ, CARL  
Address: 4110 N. SCOTTSDALE RD., SUITE 360  
City-St-Zip: SCOTTSDALE, AZ 85251

Title: TS  
Name: KUBITZ, FLORA  
Address: 4110 N. SCOTTSDALE RD., SUITE 360  
City-St-Zip: SCOTTSDALE, AZ 85251

I hereby 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 all other like empowered.

SIGNATURE: FLORA KUBITZ

TS

04/18/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date