# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000005210

Entity Name: VCXI SOLUTION, INC.

FILED Feb 16, 2009 Secretary of State

Current Princip	oal Place of Business:	<b>New Princi</b>	pal Place of Business:

2881 E. OAKLAND PARK BLVD, SUITE 217 2881 E. OAKLAND PARK BLVD

FT. LAUDERDALE, FL 33306 SUITE 217

FT. LAUDERDALE, FL 33306

**Current Mailing Address:** New Mailing Address:

2881 E. OAKLAND PARK BLVD, SUITE 217 2881 E. OAKLAND PARK BLVD FT. LAUDERDALE, FL 33306 SUITE 217

FT. LAUDERDALE, FL 33306

FEI Number: 28-3319981 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR., STE 4 WESTON, FL 33331

NRAI SERVICES, INC. 2731 EXECUTIVÉ PARK DR SUITE 4 WESTON, FL 33331 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: 02/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

# ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

FOERSTER, RAINER FOERSTER, RAINER Name: Name: 2881 E. OAKLAND PARK BLVD, SUITE 217 Address: 1119 NE 1ST STREET Address:

City-St-Zip: FT. LAUDERDALE, FL 33306 City-St-Zip: FT. LAUDERDALE, FL 33301

Title: Title: (X) Change ( ) Addition () Delete

Name: RAUHE, SASCHA Name: RAUHE, SASCHA

5050 POPLAR AVENUE, SUITE 1103 800 NATURE'S COVE ROAD Address: Address: MEMPHIS, TN 38157 DANIA BEACH, FL 33004 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete (X) Change ( ) Addition

RAUHE, KATJA Name: RAUHE, KATJA Name:

5050 POPLAR AVENUE, SUITE 1103 800 NATURE'S COVE ROAD Address Address: City-St-Zip: MEMPHIS, TN 38157 City-St-Zip: DANIA BEACH, FL 33004

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: KATJA RAUHE S 02/16/2009