2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# F98000001715

Entity Name: RADIXX SOLUTIONS INTERNATIONAL, INC.

Current Principal Place of Business:

6310 HAZELTINE NATIONAL DRIVE
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

6310 HAZELTINE NATIONAL DRIVE
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 52-2088221 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	D	( ) Delete
Name:	JOHNSTON, JAMES	
Address:	1 STONEHEDGE CT.	
City-St-Zip:	WARREN, NJ 07059	
Title:	PCD	( ) Delete
Name:	PERI, RONALD J	
Address:	11516 WILLOW GARDENS DRIVE	
City-St-Zip:	WINDERMERE, FL	
Title:	S	( ) Delete
Name:	ANDERSON, THOMAS	
Address:	31 ROEBLING ROAD	
City-St-Zip:	BERNARDSVILLE, NJ	
Title:	D	( ) Delete
Name:	COLEMAN, DENIS	
Address:	662 ISLAND DRIVE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	CHONG, LARRY	
Address:	506 12TH ST	
City-St-Zip:	BROOKLYN, NY 11215	
Title:	D	( ) Delete
Name:	WELCH, JACK	
Address:	8 HARVEY DRIVE	
City-St-Zip:	BERNARDSVILLE, NJ 07924	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: RONALD J PERI PCD 03/19/2009

Electronic Signature of Signing Officer or Director — Date