

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001715

FILED
Feb 17, 2010
Secretary of State

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
Name: JOHNSTON, JAMES
Address: 1 STONEHEDGE CT.
City-St-Zip: WARREN, NJ 07059

Title: PCD
Name: PERI, RONALD J
Address: 11516 WILLOW GARDENS DRIVE
City-St-Zip: WINDERMERE, FL

Title: S
Name: ANDERSON, THOMAS
Address: 31 ROEBLING ROAD
City-St-Zip: BERNARDSVILLE, NJ

Title: D
Name: COLEMAN, DENIS
Address: 662 ISLAND DRIVE
City-St-Zip: PALM BEACH, FL 33480

Title: D
Name: CHONG, LARRY
Address: 506 12TH ST
City-St-Zip: BROOKLYN, NY 11215

Title: D
Name: WELCH, JACK
Address: 8 HARVEY DRIVE
City-St-Zip: BERNARDSVILLE, NJ 07924

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: RONALD J PERI

PCD

02/17/2010

Electronic Signature of Signing Officer or Director

Date