

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J94278

Entity Name: MUX, INC.

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

% CHRIS KASTAN  
100 LOVERS LANE  
FT. MYERS BEACH, FL 33931

## New Principal Place of Business:

## Current Mailing Address:

% CHRIS KASTAN  
P.O. BOX 2403  
FT. MYERS BEACH, FL 33932

## New Mailing Address:

FEI Number: 65-0008801

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KASTAN, CHRIS  
100 LOVERS LANE  
FT. MYERS BEACH, FL 33931 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 ( ) Delete  
Name: KASTAN, CHRIS,  
Address: 6728 MAIN ST.  
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: SD ( ) Delete  
Name: KASTAN, DOLORES,  
Address: 6728 MAIN ST.  
City-St-Zip: WILLIAMSVILLE, NY 14221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: KASTAN, CHRIS,  
Address: 100 LOVERS LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SD (X) Change ( ) Addition  
Name: KASTAN, DOLORES,  
Address: 100 LOVERS LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

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: CHRIS KASTAN

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date