2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # J97059 FILED 1. Entity Name S.E. GRAPHX, INC. Jul 09, 2008 08:00 AM **Secretary of State** Principal Place of Business Mailing Address 4445 SW 35 TER 4445 SW 35 TER GAINESVILLE, FL 32608 GAINESVILLE, FL 32608 No Chg-P 07072008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2853000 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DEBONO, MARIE DO NOT WRITE 4445 SW 35 TER IN THIS SPACE GAINESVILLE, FL 32608 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE 18 \$150.00 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. TITLE NAME DEBONO, MARIE STREET ADDRESS 4445 SW 35 TER CITY-ST-ZIP GAINESVILLE, FL U00000953682 IIII F 07/09/08-80001-024 150.00 NAME DEBONO, JOSEPH STREET ADDRESS 4445 SW 35TH TERRACE GAINESVILLE, FL CITY-ST-78P TITLE DEBONO, STEVEN NAME STREET ADDRESS 4445 SW 35 TERR. DO NOT WRITE GAINESVILLE, FL 32608 CHY-ST-78 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the repetitive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachi

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP