

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011413

FILED
Apr 29, 2009
Secretary of State

Entity Name: AGENCIA NEXUS INTERNACIONAL INC.

Current Principal Place of Business:

10123 WILLIAM CAREY DR.
ORLANDO, FL 32832

New Principal Place of Business:

Current Mailing Address:

10123 WILLIAM CAREY DR.
ORLANDO, FL 32832

New Mailing Address:

FEI Number: 26-1568513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, ALFONSO
1121 BATES ST.
BRANDON, FL 335102934 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTIAGO, ALFONSO
Address: 1121 BATES ST.
City-St-Zip: BRANDON, FL 335102934

Title: VD () Delete
Name: BARRERA, DIANA E
Address: 901 MARLOWE AVE.
City-St-Zip: ORLANDO, FL 32809

Title: SD () Delete
Name: WALKER, JOANNE S
Address: 443 COBBLE WORD DR.
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD () Delete
Name: DAVILA, CARMEN J
Address: 903 EVERGREEN AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: ED () Delete
Name: MORALES, YAHAIRA
Address: 2146 LAKE HOLLOWAY BLVD.
City-St-Zip: LAKELAND, FL 33801

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARMEN J. DAVILA

TD

04/29/2009

Electronic Signature of Signing Officer or Director

Date