

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000036676

Entity Name: KODEWORX, INC.

FILED  
Mar 26, 2008  
Secretary of State

## Current Principal Place of Business:

8004 NW 154 ST  
SUITE 140  
MIAMI LAKES, FL 33016 US

## Current Mailing Address:

8004 NW 154 ST  
SUITE 140  
MIAMI LAKES, FL 33016 US

## New Principal Place of Business:

9737 NW 41 STREET  
SUITE 481  
DORAL, FL 33178 US

## New Mailing Address:

9737 NW 41 STREET  
SUITE 481  
DORAL, FL 33178 US

FEI Number: 65-1006580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGUILAR, RICHARD  
757 NW 27 AVE  
SUITE 204  
MIAMI, FL 33125 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: GERSTNER, ALEXANDER  
Address: 8004 NW 154 ST SUITE 140  
City-St-Zip: MIAMI LAKES, FL 33016

Title: D ( ) Delete  
Name: ALONSO, ARIEL  
Address: 8004 NW 154 ST SUITE 140  
City-St-Zip: MIAMI LAKES, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GERSTNER, ALEXANDER  
Address: 9737 NW 41 STREET, SUITE 481  
City-St-Zip: DORAL, FL 33178 US

Title: D (X) Change ( ) Addition  
Name: ALONSO, ARIEL  
Address: 9737 NW 41 STREET, SUITE 481  
City-St-Zip: DORAL, FL 33178 US

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: ARIEL ALONSO

D

03/26/2008

Electronic Signature of Signing Officer or Director

Date