

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000073923

1. Entity Name
I E X E M CORP



Principal Place of Business
**17563 SW 29 LANE
MIRAMAR, FL 33029**

Mailing Address
**17563 SW 29 LANE
MIRAMAR, FL 33029**



07062004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1126126

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HUNTER, ALEX
14732 BRECKNESS PL
MIAMI LAKE, FL 33016**

**DO NOT WRITE
IN THIS SPACE**

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)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PTD
HUNTER, ALEX
14732 BRECKNESS PL
MIAMI LAKE, FL 33016**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VSD
COUTTENYE, JOHANA
14732 BRECKNESS PL
MIAMI LAKE, FL 33016**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

000000168703
07/29/04-80003-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-06-04

Date

754 4238504

Daytime Phone #