## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000095605

**FILED** Mar 31, 2009 Secretary of State

Entity Name: CONNEXION SALES & SERVICES, CORP. **Current Principal Place of Business: New Principal Place of Business:** 2500 NE 135 ST., STE. 209 N. MIAMI BEACH, FL 33181 **Current Mailing Address: New Mailing Address:** 2500 NE 135 ST., STE. 209 N. MIAMI BEACH, FL 33181 FEI Number: 65-1142529 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARANBAR, JUAN C 2500 NE 135ST #209 MIAMI, FL 33134 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition ARANIBAR, JUAN CARLOS ARANIBAR, JUAN CARLOS Name: Name: 2500 NE 135 ST., STE. 209 2500 NE 135 ST., STE. 209 Address: Address: City-St-Zip: N. MIAMI BEACH, FL 33181 City-St-Zip: N. MIAMI BEACH, FL 33181

Title: ٧S (X) Delete Title: () Change () Addition

Name: ARANIBAR, JUAN Name: 2500 NE 135 ST., STE. 209 Address: Address: N. MIAMI BEACH, FL 33181 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: JUAN ARANIBAR 03/31/2009