

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115582

Entity Name: QYX LEARNING, INC.

FILED  
Jul 08, 2005  
Secretary of State

## Current Principal Place of Business:

2624 5TH AVE NORTH  
SAINT PETERSBURG, FL

## New Principal Place of Business:

## Current Mailing Address:

3225 S. MACDILL AVE. #129-239  
TAMPA, FL 33629

## New Mailing Address:

FEI Number: 59-3761358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, BROWER M  
2109 BAYSHORE BLVD #804  
TAMPA, FL 33606 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: PC ( ) Delete  
Name: ROBERTS, BROWER M  
Address: 2109 BAYSHORE BLVD. #804  
City-St-Zip: TAMPA, FL 33606 US

Title: M ( ) Delete  
Name: ASLESON, ROBERT F  
Address: 3225 S. MACDILL AVE. #129-239  
City-St-Zip: TAMPA, FL 33629 US

Title: F ( ) Delete  
Name: BROWN, RICHARD  
Address: 1810 S. MACDILL AVE.  
City-St-Zip: TAMPA, FL 33629

Title: M (X) Delete  
Name: FAYNE, MICHAEL  
Address: 2800 HARBOURSIDE DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34226

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BROWER MURPHY ROBERTS

PC

07/08/2005

Electronic Signature of Signing Officer or Director

Date