

Amended

FILED
03 DEC -4 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000044416																														
1. Entity Name MICROIX, INC.																														
Principal Place of Business 2334 SW 130 TER MIRAMAR, FL 33027		Mailing Address 2334 SW 130 TER MIRAMAR, FL 33027																												
2. Principal Place of Business		3. Mailing Address																												
Suite, Apt. #, etc.		Suite, Apt. #, etc.																												
City & State		City & State																												
Zip	Country	Zip	Country																											
4. FEI Number 53-1958445		Applied For ☐ Not Applicable																												
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																												
6. Name and Address of Current Registered Agent GEORGE, JOELLE F 2334 SW 130 TER MIRAMAR, FL 33027		7. Name and Address of New Registered Agent Name RICKIE GEORGE Street Address (P.O. Box Number is Not Acceptable) 2334 SW 130 Terrace City MIRAMAR FL Zip Code 33027																												
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 <u><i>Joelle George</i></u> DATE <u>12/1/03</u> Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent's signature required when withdrawing)																														
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																												
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																												
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>Joelle George</i></u>		12/1/03 754.5815477																												
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #																												

CR2E034 (10/02)

TR