

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2008 8:00 am
Secretary of State

06-05-2008 90002 047 ***150.00

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|--|---|---|---|---|--|
| DOCUMENT # P02000111923 1. Entity Name AXION A., CORP | | | | | |
| Principal Place of Business 1049 NE 44 ST OAKLAND PARK, FL 33334 | | | Mailing Address 1049 NE 44 ST OAKLAND PARK, FL 33334 | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 52-2383915 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent FERNANDEZ, FREDDY 4332 NE 11 AV FORT LAUDERDALE, FL 33334 | | | 7. Name and Address of New Registered Agent Name FREDDY FERNANDEZ Street Address (P.O. Box Number is Not Acceptable) 1049 NE 44 ST City OAKLAND PARK FL Zip Code 33334 | | |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FERNANDEZ, FREDDY F SR. 4332 N.E. 11 AV. FORT LAUDERDALE, FL 33334 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FREDDY FERNANDEZ 1049 NE 44 ST OAKLAND PARK, FL. 33334 <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S FERNANDEZ, FREDDY F SR. 4332 N.E. 11 AV FORT LAUDERDALE, FL 33334 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S FREDDY FERNANDEZ 1049 NE 44 ST OAKLAND PARK, FL. 33334 <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: | | 5-30-08 938-4020 | | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date Daytime Phone # | | | |