

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099277

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: MEMOREX ENTERPRISES, INC.

## Current Principal Place of Business:

7737N UNIVERSITY DR  
SUITE 202  
TAMARAC, FL 33321

## New Principal Place of Business:

8255 N UNIVERSITY DR  
SUITE 600  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

7737N UNIVERSITY DR  
SUITE 202  
TAMARAC, FL 33321

## New Mailing Address:

8255 N UNIVERSITY DR  
SUITE 600  
CORAL SPRINGS, FL 33065

FEI Number: 20-0227395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANIAR, RAJU  
7737 N UNIVERSITY DRIVE #201  
TAMARAC, FL 33321 US

## Name and Address of New Registered Agent:

MANIAR, HARISH  
2855 N UNIVERSITY DRIVE  
SUITE 600  
CORAL SPRINGS, FL 33065 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: HARISH MANIAR

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MANIAR, HARISH  
Address: 2306 NW 96 WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SEC ( ) Delete  
Name: MANIAR, NALINI  
Address: 2306 NW 96 WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MANIAR, HARISH  
Address: 2306 NW 96 WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: HARISH MANIAR

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date