

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063843

Entity Name: AXXESO FINANCIAL, INC.

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

9647 PARKVIEW AVE
BOCA RATON, FL 33428

New Principal Place of Business:

19715 SEDGEFIELD TERR
BOCA RATON, FL 33498

Current Mailing Address:

9647 PARKVIEW AVE
BOCA RATON, FL 33428

New Mailing Address:

P.O. BOX 970063
BOCA RATON, FL 33497

FEI Number: 20-1011750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COYRA, MADELEINE L
9647 PARKVIEW AVE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

BRUCE, CAROL J
19715 SEDGEFIELD TER
BOCA RATON, FL 33498 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: CAROL JOYCE BRUCE

03/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CATIENES, ARMANDO R
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D () Delete
Name: COYRA, MADELEINE L
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D () Delete
Name: BRUCE, CAROL
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D () Delete
Name: MICHELENA, ALEJANDRO LEAL
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEAL, ALEJANDRO S
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D (X) Change () Addition
Name: BRUCE, CAROL J
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D (X) Change () Addition
Name: WOLDER, DARYL M
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

Title: D (X) Change () Addition
Name: MESQUITA, MARIO
Address: P.O. BOX 970063
City-St-Zip: BOCA RATON, FL 334970063

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: CAROL JOYCE BRUCE

DIR.

03/07/2005

Electronic Signature of Signing Officer or Director

Date