2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065434

Entity Name: 4X MONEYBIZ, CORP

FILED Sep 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11907 DEVOE CT 6278 N.FEDERAL HWY ORLANDO, FL 32821

561

FT LAUDERDALE, FL 33308

Current Mailing Address: New Mailing Address:

11907 DEVOE CT 6278 N.FEDERAL HWY

ORLANDO, FL 32821 561

FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 01-3314977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAHIB, ASH H REED, MARILYN 11907 DEVOE CT 6278 N. FEDERAL HWY

ORLANDO, FL 32821 US FT LAUDERDALE, FL 33308 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: MARILYN REED 09/17/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SAHIB, ASHRAF (ASH) H SAHIB, ASHRAF (ASH) H Name: Name: 11907 DEVOE CT Address: 6278 N.FEDERAL HWY ,NO 561 Address: City-St-Zip: ORLANDO, FL 32821 US City-St-Zip: FT LAUDERDALE, FL 33308 US

Title: V.P Title: V.P (X) Change () Addition () Delete

Name: BUSTOS, FLOR M Name: BUSTOS, FLOR M

11907 DEVOE CT Address: 6278 N.FEDERAL HWY, NO 561 Address: ORLANDO, FL 32821 US FT LAUDERDALE, FL 33308 US City-St-Zip: 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.

Ρ SIGNATURE: ASHRAF (ASH) H. SAHIB 09/17/2009