

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107029

Entity Name: RACINX, INC.

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 8016
JACKSONVILLE, FL 322398016

New Principal Place of Business:

12207 CAPTIVA BLUFF RD N
JACKSONVILLE, FL 32226

Current Mailing Address:

PO BOX 8016
JACKSONVILLE, FL 322398016

New Mailing Address:

FEI Number: 34-2007996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVAREZ, REBECCA
12207 CAPTIVA BLUFF RD
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: OLIVAREZ, REBECCA
Address: PO BOX 8016
City-St-Zip: JACKSONVILLE, FL 322398016

Title: DP (X) Delete
Name: OLIVAREZ, THEODORE
Address: PO BOX 8016
City-St-Zip: JACKSONVILLE, FL 322398016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: REBECCA OLIVAREZ

DV

04/28/2007

Electronic Signature of Signing Officer or Director

_____ Date