

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000173205

Entity Name: DEVLEX CORP

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

549 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33325 US

New Principal Place of Business:

11580 LAKEVIEW DRIVE
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

549 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33325 US

New Mailing Address:

11580 LAKEVIEW DRIVE
CORAL SPRINGS, FL 33071 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICARI, ROBERT G
549 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL FL US

Name and Address of New Registered Agent:

LICARI, ROBERT G
11580 LAKEVIEW DRIVE
CORAL SPRINGS, FL FL 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:

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LICARI, ROBERT G
Address: 549 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33325 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LICARI, ROBERT G
Address: 11580 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT LICARI

P

04/18/2006

Electronic Signature of Signing Officer or Director

Date