2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154445

Entity Name: PIXY INC

FILED Apr 10, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Ourient i inicipal i lace of Business.	New I fillelpai i lace of Basiliess.

3568 SHORELINE CIRCLE

PALM HARBOR, FL 34684 US

2923 W. BAY DRIVE
BELLEAIR BLUFFS
LARGO, FL 33770 US

Current Mailing Address: New Mailing Address:

3568 SHORELINE CIRCLE
PALM HARBOR, FL 34684 US
BELLEAIR BLUFFS
LARGO, FL 33770 US

FEI Number: 20-3819668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MEHTA, NEHA V
3568 SHORELINE CIRCLE
PALM HARBOR, FL 34684 US

MEHTA, NEHA V
165 SUNSHINE DRIVE
PALM HARBOR, FL 34684 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: NEHA MEHTA 04/10/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MEHTA, DIPTI D
 Name:
 MEHTA, VIREN

 Address:
 3568 SHORELINE CIRCLE
 Address:
 165 SUNSHINE DRIVE

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:
 PALM HARBOR, FL 34684 US

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MEHTA, NEHA V
 Name:

 Address:
 3568 SHORELINE CIRCLE
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:

Title: AVP (X) Delete Title: () Change () Addition

 Name:
 MEHTA, DILIP A
 Name:

 Address:
 3568 SHORELINE CIRCLE
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:

Title: SEC (X) Delete Title: () Change () Addition

 Name:
 MEHTA, VIREN A
 Name:

 Address:
 3568 SHORELINE CIRCLE
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 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: NEHA MEHTA MGR 04/10/2008