## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000006161

Entity Name: AXXION SYSTEMS INC.

FILED May 01, 2007 Secretary of State

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

4500 NW 107 AVE #108 3060 NW 72 AVE.
DORAL, FL 33178 MIAMI, FL 33122

Current Mailing Address: New Mailing Address:

4500 NW 107 AVE #108 3060 NW 72 AVE. DORAL, FL 33178 MIAMI, FL 33122

FEI Number: 20-4127112 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:

CRUZ, JAIME E RESTREPO, LUIS F 4500 NW 107 AVENUE #108 3060 NW 72 AVE.
DORAL, FL 33178 US MIAMI, FL 33122 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: LUIS F. RESTREPO 05/01/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: NAPOLES, BERNARDO Name: RESTREPO, LUIS F

 Name
 NAPOLES, BERNARDO
 Name
 RESTREPO, LOIS

 Address:
 2130 WINCREST LAKE CIRCLE
 Address:
 3060 NW 72 AVE.

 City-St-Zip:
 ORLANDO, FL 32829
 City-St-Zip: MIAMI, FL 33122

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

 Name:
 RESTREPO, LUIS F
 Name:
 LOPEZ, EDWIN

 Address:
 4500 NW 107 AVENUE #108
 Address:
 3060 NW 72 AVE.

 City-St-Zip:
 DORAL, FL 33178
 City-St-Zip:
 MIAMI, FL 33122

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

 Name:
 LOPEZ, EDWIND
 Name:

 Address:
 16243 SW 47 CT
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 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: LUIS F. RESTREPO P 05/01/2007