

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071629

Entity Name: CORRECTAX, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

633 NE 167TH STREET
SUITE 1025
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

633 NE 167TH STREET
SUITE 1025
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 26-3108884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICE OF DONNA HEARNE-GOUSSE PA
233 N. FEDERAL HIGHWAY
SUITE 53
DANIA BEACH, FL 33004 US

Name and Address of New Registered Agent:

LAW OFFICE OF DONNA HEARNE-GOUSSE PA
32 S J STREET
LAKE WORTH, FL 33460 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:

05/01/2009

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: P () Delete
Name: BARNES, CHERYL D
Address: 633 NE 167TH STREET, 1025
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Delete
Name: GOUSSE, DONNA M
Address: 32 SOUTH J STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: T () Delete
Name: CAZEAU, BEATRICE
Address: 633 NE 167TH STREET, 1025
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DONNA GOUSSE

S

05/01/2009

Electronic Signature of Signing Officer or Director

Date