

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000082408

Entity Name: REACTIONGRID INC.

FILED
Feb 17, 2011
Secretary of State

Current Principal Place of Business:

132 AURELIA CT.
LISSIMMEE, FL 34758 US

New Principal Place of Business:

132 AURELIA CT.
132 AURELIA CT.
KISSIMMEE, FL 34758 US

Current Mailing Address:

132 AURELIA CT.
LISSIMMEE, FL 34758 US

New Mailing Address:

132 AURELIA CT.
132 AURELIA CT.
KISSIMMEE, FL 34758 US

FEI Number: 27-1060524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMBOY, KYLE J
1401 PARKLAND BLVD
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

GOMBOY, KYLE J
132 AURELIA CT.
KISSIMMEE, FL 34758 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: KYLE GOMBOY

02/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: GOMBOY, KYLE J
Address: 132 AURELIA CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: COO
Name: GOMBOY, ROBIN A
Address: 132 AURELIA CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: CTO
Name: HART, CHRISTINE R
Address: 132 AURELIA CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: CPO
Name: JEFF, LOWE
Address: 132 AURELIA CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: NA
Name: NA, NA
Address: NA
City-St-Zip: KISSIMMEE, FL 34758 US

Title: NA
Name: NA, NA
Address: 132 AURELIA CT.
City-St-Zip: KISSIMMEE, FL 34758 US

I hereby 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 all other like empowered.

SIGNATURE: KYLE GOMBOY

CEO

02/17/2011

Electronic Signature of Signing Officer or Director

Date