2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2012
Secretary of State

DOCUMENT# P09000082408

Entity Name: REACTIONGRID INC.

Current Principal Place of Business:

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

New Principal Place of Business:

5016 GANDROSS LN
MOUNT DORA, FL 32757 US

Current Mailing Address:

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

New Mailing Address:

5016 GANDROSS LN
MOUNT DORA, FL 32757 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
132 AURELIA CT.
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

GOMBOY, KYLE J
5016 GANDROSS LN
MOUNT DORA, FL 32757 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: _____ 06/18/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: GOMBOY, KYLE J
Address: 5016 GANDROSS LN
City-St-Zip: MOUNT DORA, FL 32757 US

Title: COO
Name: GOMBOY, ROBIN A
Address: 5016 GANDROSS LN
City-St-Zip: MOUNT DORA, FL 32757 US

Title: CTO
Name: HART, CHRISTINE R
Address: 5016 GANDROSS LN
City-St-Zip: MOUNT DORA, FL 32757 US

Title: CPO
Name: JEFF, LOWE
Address: 5016 GANDROSS LN
City-St-Zip: MOUNT DORA, FL 32757 US

Title: NA
Name: NA, NA
Address: NA
City-St-Zip: MOUNT DORA, FL 32757 US

Title: NA
Name: NA, NA
Address: NA
City-St-Zip: MOUNT DORA, FL 32757 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: ROBIN A GOMBOY PRES 06/18/2012
Electronic Signature of Signing Officer or Director — Date