2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 30, 2007
Secretary of State

DOCUMENT# P94000075478

Entity Name: PRAXIS NETWORK, INC.

Current Principal Place of Business:

908 NW 57 STREET
SUITE D
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

908 NW 57 STREET
SUITE D
GAINESVILLE, FL 32605 US

New Mailing Address:

FEI Number: 59-3281012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALLACE, SHERI
908 NW 57 STREET
SUITE D
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WALLACE, SHERI
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

Title: DVST ( ) Delete
Name: DAGLIO, RICARDO
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: WALLACE, SHERI
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

Title: DP (X) Change ( ) Addition
Name: DUENAS, ROY
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

Title: DT ( ) Change (X) Addition
Name: FERGUSON, VINCENT
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Change (X) Addition
Name: MORENO, JOSE I
Address: 908 NW 57 STREET, SUITE D
City-St-Zip: GAINESVILLE, FL 32605

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: ROY DUENAS D 10/30/2007

Electronic Signature of Signing Officer or Director Date