

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000106029

Entity Name: FLEXXSPACE USA, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172

## New Mailing Address:

FEI Number: 65-0807818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVY, JOEL  
1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

ADLER, LINDA K  
1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 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: LINDA K. ADLER

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ADLER, MICHAEL M  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: DEV ( ) Delete  
Name: LEVY, JOEL  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: AS/T ( ) Delete  
Name: LEVY, JOEL  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: ADLER, LINDA K  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVPT (X) Change ( ) Addition  
Name: ADLER, MATTHEW L  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: EVP (X) Change ( ) Addition  
Name: HARRIS, BRETT W  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

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: LINDA K. ADLER

S

04/28/2009

Electronic Signature of Signing Officer or Director

Date