

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012229

Entity Name: PANEXIM, INC.

FILED  
Jan 11, 2007  
Secretary of State

## Current Principal Place of Business:

4441 SUNBEAM ROAD  
# 23904  
JACKSONVILLE, FL 322241

## Current Mailing Address:

11927 BLUE SPRUCE  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

4441 SUNBEAM ROAD  
# 23904  
JACKSONVILLE, FL 322241 US

## New Mailing Address:

FEI Number: 59-3555801      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PAPPADIS, NICHOLAS P  
11927 BLUE SPUCE  
JACKSONVILLE, FL 32223 US

## Name and Address of New Registered Agent:

PAPPADIS, NICHOLAS P  
11927 BLUE SPRUCE  
JACKSONVILLE, FL 32223 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: NICHOLAS P. PAPPADIS

01/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DIR. ( ) Delete  
Name: PAPPADIS, ATHANASSIA  
Address: 7035 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: PRES ( ) Delete  
Name: PAPPADIS, NICHOLAS  
Address: 7035 PHILLIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: V/P ( ) Delete  
Name: PAPPADIS, SOPHIE  
Address: 7035 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: DIR (X) Delete  
Name: PAPPADIS, SUZANE  
Address: 7035 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE. (X) Change ( ) Addition  
Name: PAPPADIS, NICHOLAS P  
Address: 11927 BLUE SPRUCE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: V/P (X) Change ( ) Addition  
Name: PAPPADIS, SOPHIE  
Address: 11927 BLUE SPRUCE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: DIR (X) Change ( ) Addition  
Name: PAPPADIS, SUZANE  
Address: 11927 BLUE SPRUCE  
City-St-Zip: JACKSONVILLE, FL 32223 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: NICHOLAS P. PAPPADIS

PRES

01/11/2007

Electronic Signature of Signing Officer or Director

Date