

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000069951

FILED
May 01, 2004
Secretary of State

Entity Name: INTERAXIOM CORPORATION

Current Principal Place of Business:

15 BLARE DRIVE
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

15 BLARE DRIVE
PALM COAST, FL 32137 US

New Mailing Address:

3524 CHESHIRE SQUARE
SARASOTA, FL 34237 US

FEI Number: 65-1011764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABELLERA, ROSITO P DR.
15 BLARE DRIVE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

ABELLERA, ROSENDO
3524 CHESHIRE SQUARE
B
SARASOTA, FL 34237 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: ROSENDO ABELLERA

05/01/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ABELLERA, ROSENDO M
Address: 15 BLARE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

Title: COO () Delete
Name: RUSS, ABELLERA M
Address: 15 BLARE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ABELLERA, ROSENDO M
Address: 15 BLARE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

Title: D (X) Change () Addition
Name: RUSS, ABELLERA M
Address: 15 BLARE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROSENDO ABELLERA

PRES

05/01/2004

Electronic Signature of Signing Officer or Director

Date