## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

DOCUMENT # F69802

MAXIMILLIAN INVESTMENTS, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(9)

## FILED Mar 19 1997 8:00am Secretary of State

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Principal Place of Business #700 SHERIDAN STREET SUITE \$ HOLLYWOOD FL 33021		Mailing Address 4700 SHERIDAN STREET SUITE S HOLLYWOOD FL 33021-3416				818    Bi     118			
						3. Date Incorporated or Qualified 02/25/1982	3. Date Incorporated or Qualified		
2. Principal Pr	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21 Suite, Apt	# etc	Suite, Apt #, etc.				59-2217567	Not Applicable \$8.75 Additional		
22		27				5. Certificate of Status Desired	Fee Required		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00	· · · · · · · · · · · · · · · · · · ·
Zip	Country	<b>28</b>   		ntry			on Added to Fees liability for intangible tax under s. 199.032,		
24	25	25 29 30				Florida Statutes XYos No 10. Name and Address of New Registered Agent			
COTA	<ol> <li>Name and Address of Current</li> <li>RICHARD</li> </ol>	Registered Agent		81	 Name	10. Name and Address of New Ho	igistered Ag	ent 	
	SHERIDAN STREET					ddress (P.O. Box Number is Not Accepta	hle)		
SUIT	ES		<u> </u>			Actions (1.0. Flox Hombel 18 Not Accepte			
HOL	LYWOOD FL 33021	83							
				84	City		FL	B5 Zip C	Code
office or r igent. La	egistered agent, or both, in the State of m familiar with, and accept the obligation of the control of the co	of Horida, Such change was tions of, Section 607.0505, F	authorize torida Stat	d tiy utes	the corpo	orporation submits this statement for the ration's board of directors. I hereby acce	purpose of cl pt the appoir	nanging ils itment as	s registered registered
12.	Signature, typed or pointed name of registered apic a OFFICERS AND		13.	:i Agei	ul signature re	quirest white reliestating)  ADDITIONS/CHANGES TO OFFI		RECTOR	S IN 12
TITLE	DELETE 1.1		1,1 10	1.1100				Change	Addition
NAME ERTAG, RICHARD 411 COLUMBUS PARKWAY, #2		•	1.2 NAME						
STREET ADDRESS	HOLLYWOOD FL 33021	<b>(</b>	1.3 STRELL ADDRESS						
CITY-ST-ZIP	HOLLINGOD I L GOOLI	DITTE	1.4 CITY - ST E 2.1 101 (f		I · ZIF'			Change	Addition
NAME	_			2.2 NAME					
STREET ADDRESS			2.3 STREET ADDIKESS		ADUKESS				
CITY-ST-ZIP			2. 4 CHY+ \$1-2IP		1-2fP			7.05	Addition
, TITLE		L DELETE	3.1 1111.6				L	_ Change	Addition
NAME			3.2 NAME 3.3 STREET ADDRESS		ADIMOTOG				
STREET ADDRESS CITY-ST-ZIP			1						
TITLE	-	DELETE	34 CHY-S1-7		'			Change	Addition
NAME			14.2 N						
STREET ADDRESS			4.3 5	BEET	ADDRESS				
CITY-ST-ZIP			4.4.0	1y - \$	1 - ZIP				
TITLE		DELETE	•				L	_ Change	Addition
NAME			52 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4.0 (IY-S1-7)P 6.1 III.LE		1-7P		T	Change	Addition
, TITLE NAME			62 N		1		-		
STREET ADDRESS			63 STREET ADDRESS		ADDRESS				

14. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), I forida Statutes. I further certify that the information indicated on this army of report or suppliemental annual report is true and accurate and that my 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 liquido empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching 1 with an address.