


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000086915
 1. Entity Name
CREDITMAX LLC



Principal Place of Business Mailing Address
625 N. FLAGLER DRIVE, SUITE 625 **625 N. FLAGLER DRIVE, SUITE 625**
WEST PALM BEACH, FL 33401 **WEST PALM BEACH, FL 33401**

DO NOT WRITE IN THIS SPACE



01112006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1952529	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
BERNSTEIN, MICHAEL
625 N. FLAGLER DRIVE, SUITE 625
WEST PALM BEACH, FL 33401

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERNSTEIN, MICHAEL E. 625 N FLAGLER DR STE 625 WEST PALM BEACH, FL 33401
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Michael Bernstein* Michael Bernstein 01/12/2006 (561) 352-2280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #