

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165204

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** BUSINESS MAX MULTIMEDIA CORP.

**Current Principal Place of Business:**

8801 HUNTERS LAKE DRIVE  
SUITE 136  
TAMPA, FL 33647

**New Principal Place of Business:**

324 N. DALE MABRY HIGHWAY  
SUITE 301  
TAMPA, FL 33609

**Current Mailing Address:**

8801 HUNTERS LAKE DRIVE  
SUITE 136  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 26-0101647      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GLASS, DAVID C  
8801 HUNTERS LAKE DRIVE  
SUITE 136  
TAMPA, FL 33647 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GLASS, DAVID C  
Address: 8801 HUNTERS LAKE DRIVE, SUITE 136  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DAVID C GLASS

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04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date