## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000022922

**Entity Name: MAXANYA CORPORATION** 

FILED Jan 15, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1741 S.E. 46TH LANE #104 1741 S.E. 46TH LANE CAPE CORAL, FL 33904 US APT. 104 CAPE CORAL, FL 33904 US **Current Mailing Address: New Mailing Address:** % DR. MAX E. WIDMER SEMINARSTRASSE 28, CH-5400 BADEN SWITZERLAND, AG 5400 XX FEI Number: 65-0740475 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOLK, CRAIG R 6326 WHISKEY CREEK DRIVE SUITE A FORT MYERS, FL 33919 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition WIDMER, MAX E Name: Name: SEMINARSTRASSE 28, CH-5400 Address: Address: City-St-Zip: BADEN, SWITZERLAND, CH 5400 CH City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: WIDMER, ANJA E Name: SEMINARSTRASSE 28, CH-5400 Address: 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: MAX E. R. WIDMER DR. 01/15/2007

BADEN, SWITZERLAND, CH 5400 CH

City-St-Zip: