2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080423

Address:

City-St-Zip:

48 WALL STREET

NEW YORK, NY 10005 US

Entity Name: WINMAX TRADING GROUP, INC

FILED Apr 09, 2008 Secretary of State

_many man		THE SHAPE STREET, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
48 WALL S 11TH FLO NEW YOR		US	4767 NEW BROAD STE ORLANDO, FL 32814	REET US	
Current M	lailing Addres	s:	New Mailing Address:	New Mailing Address:	
48 WALL S 11TH FLO NEW YOR		US	4767 NEW BROAD STI ORLANDO, FL 32814	REET US	
FEI Number:	: 65-0702554	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US			•	SKLAR, GERALD E PRES 4767 NEW BROAD STREET ORLANDO, FL 32814 US	
The above in the State	named entity se of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: GERALD E. SKLAR				04/09/2008	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () SKLAR, GERAL 48 WALL STRE NEW YORK, N	ET	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	VD () YOUNG, DAVE 48 WALL STRE NEW YORK, N		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	D () MILLER, ANTHO 48 WALL STRE NEW YORK, N	ET	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	D (X) PROBER, ELAI	Delete NE	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: GERALD E. SKLAR PD 04/09/2008