

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006965

Entity Name: MAXFITONE CARES INC

Current Principal Place of Business:

941 S. MILITARY TRAIL
F2
WEST PALM BEACH, FL 33415

Current Mailing Address:

941 S. MILITARY TRAIL
F2
WEST PALM BEACH, FL 33415 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLINA, JOEL
941 S. MILITARY TRAIL
F2
WEST PALM BEACH, FL 33415 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

Officer/Director Detail :

Title P
Name MOLINA, JOEL
Address 941 S. MILITARY TRAIL, F2
City-State-Zip: WEST PALM BEACH FL 33415

Title VP
Name QUINONES, EYDIE
Address 941 S. MILITARY TRAIL, F2
City-State-Zip: WEST PALM BEACH FL 33415

Title SEC
Name GONZALES, ARIEL
Address 941 S. MILITARY TRAIL, F2
City-State-Zip: WEST PALM BEACH FL 33415

Title SEC
Name FERRER, GLADYS
Address 941 S. MILITARY TRAIL, F2
City-State-Zip: WEST PALM BEACH FL 33415

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOEL MOLINA

PRESIDENT

02/19/2014

Electronic Signature of Signing Officer/Director Detail

Date