## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## **FILED** Apr 06, 2007 08:00 A Secretary of State **DOCUMENT # 332146** 1. Entity Namo MAYA GROVES, INC. Principal Place of Business Mailing Address 316 BANYAN BLVD. 316 BANYAN BLVD PO BOX 4118 WEST PALM BEACH FL 33402 P.O. BOX 4118 W. PALM BEACH FL 33402-4118 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Numbor City & State Applied For 59-1227003 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FARISH, JOS. D., JR. Street Address (P.O. Box Number is Not Acceptable) 316 BANYAN BLVD. WEST PALM BEACH FL 33401 City Zin Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THILE Delete mil ☐ Change ☐ Addition FARISH, JOS D. JR. NAME NAMI 316 BANYAN BLVD. STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CHY-SI-7IP CHY-S1-7P 1010 ☐ Delete HH NAME MAM STREET LADORESS STREET ADDRESS CHY-S1-7P CHY-SI-7IP BHI Delete HITT ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-7IP TITLE Delete ☐ Change 71111 Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CHY-SI-70 CHY-SI-ZIP 1000 ☐ Delete ☐ Change THE Addition NAM NAMI STREET ADDRESS STREET ADDRESS CITY-S1-7/P CHY-ST-ZIP THILE ☐ Delete THE Change ■ Addition NAMÉ NAM STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an efficiency 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4/3/07 561.659-3500 Daile Daylore Prone 4