

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001960

Entity Name: MAXCESS TECHNOLOGIES, INC.

FILED
Feb 08, 2006
Secretary of State

Current Principal Place of Business:

230 DEMING WAY
SUMMERVILLE, SC 29483

New Principal Place of Business:

Current Mailing Address:

1630 COBB INTERNATIONAL BLVD
KENNESAW, GA 30152

New Mailing Address:

FEI Number: 56-2446925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: COLOSIMO, SAM
Address: 230 DEMING WAY
City-St-Zip: SUMMERVILLE, SC 29483

Title: D () Delete
Name: KUSUMOTO, MITUO
Address: 1630 COBB INTERNATIONAL BLVD
City-St-Zip: KENNESAW, GA 30152

Title: ST () Delete
Name: ROBERTS, DOUGLAS A
Address: 1630 COBB INTERNATIONAL BLVD
City-St-Zip: KENNESAW, GA 30152

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: ROBERTS, DOUGLAS A
Address: 1630 COBB INTERNATIONAL BLVD
City-St-Zip: KENNESAW, GA 30152

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: DOUGLAS A ROBERTS

TR

02/08/2006

Electronic Signature of Signing Officer or Director

_____ Date