2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000001452

Entity Name: YMAX CORPORATION

FILED Jul 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5700 GEORGIA AVE WEST PALM BEACH, FL 33405 **Current Mailing Address: New Mailing Address:** P.O.BOX 6785 WEST PALM BEACH, FL 33405 FEI Number: 20-2228721 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CEOD () Delete Title: (X) Change () Addition BORISLOW, DANIEL M BORISLOW, DANIEL M Name: Name: 1045 SOUTH OCEAN BLVD P.O.BOX 6785 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33405 Title: DC Title: () Delete (X) Change () Addition BURNS, DONALD A BURNS, DONALD A Name: Name: P.O.BOX 6785 Address: P.O.BOX 6785 Address: WEST PALM BEACH, FL 33405 WEST PALM BEACH, FL 33405 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition GREYSUICH, VLADIMIR GREYSUKH, VLADIMIR Name: Name: P O BOX 6785 P O BOX 6785 Address: Address: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: Title: TS () Delete Title: CFO (X) Change () Addition RUSSO, PETER RUSSO, PETER Name: Name: Address: P.O.BOX 6785 Address: P.O.BOX 6785 City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33405 Title: Title: () Delete (X) Change () Addition WOOD, GREGORY Name: WOOD, GREGORY Name: P.O.BOX 6785 Address: P.O.BOX 6785 Address: WEST PALM BEACH, FL 33405 WEST PALM BEACH, FL 33405 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: VENTO, GERALD P.O.BOX 6785 Address: Address:

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.

City-St-Zip:

WEST PALM BEACH, FL 33405

SIGNATURE: PETER RUSSO CFO 07/22/2008

City-St-Zip: