

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004963

Entity Name: MAXMAR CONTROLS, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

11901 W. SAMPLE RD.
CORAL SPRINGS, FL 330653164

New Principal Place of Business:

Current Mailing Address:

174 BRADY AVE.
HAWTHORNE, NY 10532

New Mailing Address:

11901 W. SAMPLE RD.
CORAL SPRINGS, FL 330653164

FEI Number: 13-3453467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

PCS ENTERPRISES, INC
7400 WILES RD
STE 102
CORAL SPRINGS, FL 33433 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: CHRIS SOWA

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: BIRRER, MAX
Address: 10909 N.W. 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: PT () Delete
Name: BIRRER, MAX
Address: 10909 N.W. 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VCHR () Delete
Name: BIRRER, MARIA D
Address: 10909 N.W. 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: SV () Delete
Name: BIRRER, MARIA D
Address: 10909 N.W. 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: TRUONG, LINHT
Address: 163 ROGERS AVENUE
City-St-Zip: HIGHTSTOWN, NJ 08520

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: TRUONG, LINH
Address: 163 ROGERS AVENUE
City-St-Zip: HIGHTSTOWN, NJ 08520

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.

SIGNATURE: MAX BIRRER

CHRM

01/13/2009

Electronic Signature of Signing Officer or Director

Date