

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J27319

FILED
Jul 01, 2004
Secretary of State

Entity Name: MAX INDUSTRIES OF SARASOTA, INC.

Current Principal Place of Business:

1201 N. LIME AVE.
SARASOTA, FL 34237 US

New Principal Place of Business:

Current Mailing Address:

8882 BLOOMFIELD BLVD.
SARASOTA, FL 34238 US

New Mailing Address:

FEI Number: 59-2723613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANDELL, BRAD SANFORD
3354 17TH ST.
SARASOTA, FL 34235 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PASD () Delete
Name: MANDELL, SAUL
Address: 8882 BLOOMFIELD BLVD.
City-St-Zip: SARASOTA, FL 34238

Title: S () Delete
Name: HOWARD, WENDY
Address: 8882 BLOOMFIELD BLVD.
City-St-Zip: SARASOTA, FL 34238

Title: TD () Delete
Name: MANDELL, EVELYN
Address: 8882 BLOOMFIELD BLVD.
City-St-Zip: SARASOTA, FL 34238

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAUL MANDELL

PASD

07/01/2004

Electronic Signature of Signing Officer or Director

_____ Date