

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J27319

FILED  
Feb 06, 2011  
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 ( )**

**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

**OFFICERS AND DIRECTORS:**

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: SAUL MANDELL

PASD

02/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date