


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # K70704
 1. Entity Name
VIEWMAX CORPORATION



Principal Place of Business Mailing Address
2101 N.W. 55TH AVENUE **2101 N.W. 55TH AVENUE**
LAUDERHILL, FL 33313 **LAUDERHILL, FL 33313**



02212006 No Chg-P CR2E034 (11/05)

4. FbJ Number Applied For
65-0112474 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GAYLE, EDNA
881 NW 115TH AVENUE
PLANTATION, FL 33325

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GAYLE, LUTHER
STREET ADDRESS	881 NW 115TH AVENUE
CITY- ST- ZIP	PLANTATION, FL 33325
TITLE	ST
NAME	GAYLE, EDNA
STREET ADDRESS	881 NW 115TH AVENUE
CITY- ST- ZIP	PLANTATION, FL 33325
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

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 03/23/08-80010-014 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luther Gayle / Luther Gayle President 3/10/06 954-731-4215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #