2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048054

Entity Name: COMPU-MAX LLC

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12165 NW 6TH AVE

NORT MIAMI, FL 33168 US

Current Mailing Address: New Mailing Address:

12165 NW 6TH AVE 2910 NW 56TH AVE

NORT MIAMI, FL 33168 US C-303

LAUDERHILL, FL 33313 US

FEI Number: 57-1207712 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:

TOUSSAINT, EMILTHON M
12165 NW 6TH AVE

TOUSSAINT, EMILTHON M
2910 NW 56TH AVE

NORTH MIAMI, FL 33168 US 2910 NW 361H A

LAUDERHILL, FL 33313 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: 04/26/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition TOUSSAINT, EMILTHON M TOUSSAINT, EMILTHON M Name: Name: Address: 12165 NW 6TH AVE Address: 2910 NW 56TH AVE APT C-303 LAUDERHILL, FL 33313 City-St-Zip: NORT MIAMI, FL 33168 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 POMPILUS, DARIOT A
 Name:

 Address:
 12165 NW 6TH AVE
 Address:

 City-St-Zip:
 NORT MIAMI, FL 33168 US
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EMILTHON M. TOUSSAINT MGRM 04/26/2005