## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L05000006080

1. Entity Name MAXIM INVESTIGATIONS, L.L.C.



6 FILED Jan 12, 2007 08:00 AN Secretary of State

Principal Place of Business

118 N BEACH STREET DAYTONA BEACH, FL 32114 Mailing Address

118 N BEACH STREET DAYTONA BEACH, FL 32114



01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2112025

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ERTHAL, MICHAEL

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C!TY-ST-ZIP

## DO NOT WRITE

DAYTONA BEACH, FL 32114		IN T	IN THIS SPACE	
	named entity submits this statement for the purpose of char ions of registered agent.	iging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007			000000585295 01/16/07-80007-002 58.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LINN, NICOLE 118 N BEACH STREET DAYTONA BEACH, FL 32114			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIRARD, JOHN 8170 S. EASTERN AVE STE 4 PMB 284 LAS VEGAS, NV 89123			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM ERTHAL, MICHAEL 118 N BEACH STREET DAYTONA BEACH, FL 32114		NOT WRITE	
CITE	I	I IN		

11.	. 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 is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #