2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L07000093428

Entity Name: EQUI-MAX LLC

Current Principal Place of Business:

11380 66TH ST. NORTH SUITE 133
LARGO, FL 33773

New Principal Place of Business:

11380 66TH ST. NORTH
SUITE 133
LARGO, FL 33773

Current Mailing Address:

11380 66TH ST. NORTH SUITE 133
LARGO, FL 33773

New Mailing Address:

FEI Number: 06-0658188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SURDI, SALVATORE A
11380 66TH ST N. SUITE 133
LARGO, FL 33773 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SURDI, SALVATORE A
Address: 11380 66TH ST. N. SUITE 133
City-St-Zip: LARGO, FL 33773

Title: MGRM ( ) Delete
Name: GRAHAM, CASEY P
Address: 11380 66TH ST. N. SUITE 133
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: SALVATORE SURDI MGRM 01/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date