FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 5:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M46285** **(6)**

1. Corporation Name
MAX INTERNATIONAL BROKERAGE CORP.

Principal Place of Business	Mailing Address
1301 NW 78TH AVE MIAMI FL 33126 US	1301 NW 78TH AVE MIAMI FL 33126 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1987
3a. Date of Last Report: 05/19/1994
4. FEI Number: 59-2801590 — Applied For / Not Applicable

2. Principal Place of Business 21 1325 NW 78th AVENUE	2a. Mailing Address 26 SAME
22 Suite, Apt. #, etc. SUITE #101	27 Suite, Apt. #, etc. SAME
23 City & State miami fl.	28 City & State SAME
24 Zip 33126 — 25 Country DADE	29 Zip SAME — 30 Country SAME

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WEITZMAN, JACK L. ESQ. 10701 SW 104 STREET MIAMI FL 33176	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	1 TITLE ☐ Change ☐ Addition
NAME	GUERRA, BENITO	1 NAME
STREET ADDRESS	8185 NW 201 TERRACE	1 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL	1 CITY-ST-ZIP
TITLE	D	2 TITLE ☐ Change ☐ Addition
NAME	SALVADOR, MAX E	2 NAME
STREET ADDRESS	10590 N W 51 STREET	2 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL	2 CITY-ST-ZIP
TITLE		3 TITLE ☐ Change ☐ Addition
NAME		3 NAME
STREET ADDRESS		3 STREET ADDRESS
CITY-ST-ZIP		3 CITY-ST-ZIP
TITLE		4 TITLE ☐ Change ☐ Addition
NAME		4 NAME
STREET ADDRESS		4 STREET ADDRESS
CITY-ST-ZIP		4 CITY-ST-ZIP
TITLE		5 TITLE ☐ Change ☐ Addition
NAME		5 NAME
STREET ADDRESS		5 STREET ADDRESS
CITY-ST-ZIP		5 CITY-ST-ZIP
TITLE		6 TITLE ☐ Change ☐ Addition
NAME		6 NAME
STREET ADDRESS		6 STREET ADDRESS
CITY-ST-ZIP		6 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Benito Guerra — 04-28-95 — 305-594-4545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0123261 CP