

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M75266

Entity Name: TRAYMAX, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

6357 ALL AMERICAN BLVD.
ORLANDO, FL 32810 US

New Principal Place of Business:

2221 WEST COUNTY ROAD 44
EUSTIS, FL 32726 US

Current Mailing Address:

6357 ALL AMERICAN BLVD
ORLANDO, FL 32810 US

New Mailing Address:

P.O. BOX 1867
EUSTIS, FL 32727 US

FEI Number: 59-2884815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDGEWAY, JOHN MARK
114 A WISTERIA DRIVE
LONGWOOD, FL 32779 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: RIDGEWAY, JOHN MARK,
Address: 114 A WISTERIA DRIVE
City-St-Zip: LONGWOOD, FL 32779 US

Title: VS () Delete
Name: RIDGEWAY, VICKI J.,
Address: 114 A WISTERIA DRIVE
City-St-Zip: LONGWOOD, FL 32779 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MARK RIDGEWAY

DPT

04/14/2005

Electronic Signature of Signing Officer or Director

_____ Date