

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000002386

FILED
Oct 16, 2007
Secretary of State

Entity Name: MAXIMUM DANCE COMPANY

Current Principal Place of Business:

9220 S.W. 158 LANE
MIAMI, FL 33157

New Principal Place of Business:

3000 BISCAYNE BLVD.
SUITE 102
MIAMI, FL 33137

Current Mailing Address:

9220 S.W. 158 LANE
MIAMI, FL 33157

New Mailing Address:

3000 BISCAYNE BLVD.
SUITE 102
MIAMI, FL 33137

FEI Number: 65-0753940 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MIGDAL, ZAMMY
9220 S.W. 158 LANE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

MIGDAL, ZAMMY
3000 BISCAYNE BLVD.
SUITE 102
MIAMI, FL 33133 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: ZAMMY MIGDAL

10/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MIGDAL, ZAMMY
Address: 3380 DEVON ROAD
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: GAMONET, JIMMY
Address: 9220 SW 158 LANE
City-St-Zip: MIAMI, FL 33157

Title: P () Delete
Name: SHIELDS, CAROLE
Address: 158 PROSPECT DRIVE
City-St-Zip: CORAL GABLES, FL 33133

Title: T () Delete
Name: PERWIN, JEAN
Address: 25 SE SECOND AVE#1144
City-St-Zip: MIAMI, FL 33131

Title: S () Delete
Name: CHAMBERLIN, ANNE
Address: 5200 NORTH COUNTRY CLUB DRIVE #2102
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GAMONET, JIMMY
Address: 600 NE 97TH STREET
City-St-Zip: MIAMI, FL 33138

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID OLDS

D

10/16/2007

Electronic Signature of Signing Officer or Director

Date