2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000069224

Entity Name: CELLMAXX.COM, INC

FILED Mar 14, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4615 N.W. 72ND AVE., STE 109 4615 N.W. 72ND AVE. UNIT# 109 MIAMI, FL 33166

MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

4615 N.W. 72ND AVE., STE 109 4615 N.W. 72ND AVE. UNIT# 109

MIAMI, FL 33166 MIAMI, FL 33166

FEI Number: 65-1024917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOURRA, ERNEST C MOURRA, ANNE V 4615 N.W. 72ND AVE. 18142 NW 61 AVENUE MIAMI, FL 33015 UNIT# 109 MIAMI, FL 33166 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: ANNE VALERIE MOURRA 03/14/2002

> Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MOURRA, ERNEST C MOURRA, ANNE V Name: Name: 18142 NW 61 AVENUE 18142 NW 61 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: MIAMI, FL 33015

Title: VΡ Title: (X) Change () Addition () Delete

Name: ECALLADO, JOSE Name: MOURRA, ERNEST C 1605 MULFARD AVE Address: 18142 NW 61 AVE Address: BRONX, NY MIAMI, FL 33015 City-St-Zip: 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: ANNE VALERIE MOURRA PD 03/14/2002