

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90099 006 ***150.00

DOCUMENT # P02000006690			
1. Entity Name MAXEMOR CORPORATION			
Principal Place of Business 7405-4TH AVE. NORTH ST. PETERSBURG, FL 33710		Mailing Address 7405-4TH AVE. NORTH ST. PETERSBURG, FL 33710	
2. Principal Place of Business 6822 22 nd Ave N. Suite 222		3. Mailing Address 6822 22 nd Ave N Suite 222	
City & State St Petersburg FL		City & State St Petersburg, FL	
Zip 33710		Zip 33710	
Country USA		Country USA	
6. Name and Address of Current Registered Agent WORTHINGTON, NATHALIE 7405 - 4TH AVENUE N. SAINT PETERSBURG, FL 33710		7. Name and Address of New Registered Agent Name: <u>Nathalie Worthington</u> Street Address (P.O. Box Number is Not Acceptable): <u>6822 22nd Ave N, Ste #222</u> City: <u>St Petersburg</u> FL Zip Code: <u>33710</u>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Nathalie Worthington</u> DATE: <u>1/25/04</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WORTHINGTON, NATHALIE 7405-4TH AVE. NORTH ST. PETERSBURG, FL 33710	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Worthington, Nathalie 6822 22 nd Ave N Ste #222 St Petersburg, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Nathalie Worthington</u>		DATE: <u>1/25/04</u> 727 3469446	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>NATHALIE WORTHINGTON</u>			