FILED
May 23, 2003 8:00 am
Secretary of State
04-30-2003 90073 030 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000012142

1. Entity Name
MAXCRAFT CORP.

55043438

Principal Place of Business	Mailing Address
~~1001 SE 16TH ST. #5~~ FORT LAUDERDALE FL 33316	~~1001 SE 16TH ST. #5~~ FORT LAUDERDALE FL 33316

1508 Sw 32nd St Fort lauderdale FL 33315.

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1508 Sw 32nd St	1508 Sw 32nd St
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FORT LAUDERDALE FL	City & State: FORT LAUDERDALE FLORIDA
Zip: 33315 / Country: USA	Zip: 33315 / Country: USA

4. FEI Number: 65-1113606 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAUTENBACH, MARCEL
~~1001 SE 16TH ST. #5~~
~~APT. 5~~
~~FORT LAUDERDALE FL 33316~~
1508 Sw 32nd St FORTLAUDERDALE FL 33315.

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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	Marcel Rautenbach Director 1508 Sw 32nd St FORT LAUDERDALE FL33315	☐ 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
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE REQUIRED — 4-26-03 — 954 4431797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
DIRECTOR

Attachment 55043438

~~#~~ P020000012142

Maxcraft Corp.
1508 Sw 32nd St
Fort Lauderdale FL 33315

May 20 2003

Phone 954-4631797
Cell 954-290-6413

Dear Ms Hood

Re: P020000012142.

Please find enclosed form -
We have included our FEI No 65 1113606
We have only one office director
My husband Marcel Rantenbach + this
is our home / office address
I hope all is now in order
Apologies for inconvenience caused
Sincerely

Jeanne Rantenbach