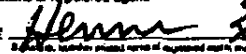


FILED
May 14, 2003 8:00 am
Secretary of State

04-25-2003 90250 030 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

55640433

DOCUMENT # P02000029133			
1. Entry Name MAXIMUM REALTY & INVESTMENT INC.			
Principal Place of Business 6635 W. COMMERCIAL BLVD., STE. 219 TAMARAC, FL 33319		Mailing Address 6635 W. COMMERCIAL BLVD., STE. 219 TAMARAC, FL 33319	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. Name and Address of Current Registered Agent ATA CORPORATE SERVICES INC. 218 SOUTHERN COUNTRY LN QUINCY, IL 62351		5. Name and Address of New Registered Agent Name HERMIN EXILUS Street Address (P.O. Box Number is Not Acceptable) 2321 SW 82 WAY City NORTH LAUDERDALE FL Zip Code 33068	
6. 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  HERMIN EXILUS 4-23-03 DATE			
7. 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 D NAME EXILUS, HERMIN STREET ADDRESS 4130 NW 8 AVE, 106 CITY-ST-ZIP CORAL SPRINGS, FL 33065		TITLE DIRECTOR NAME HERMIN EXILUS STREET ADDRESS 2321 SW 82 WAY CITY-ST-ZIP NORTH LAUDERDALE FL 33068	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(b), 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:  HERMIN EXILUS 4-23-03 (954) 718-7676 DATE			