2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000089672

Entity Name: MAXPRO INC.

City-St-Zip: LAKE WORTH, FL 33463

FILED Feb 12, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6132 ROYAL BIRKDALE DRIVE LAKE WORTH, FL 33463			SUITE 109	6132 ROYAL BIRKDALE DRIVE SUITE 109 LAKE WORTH, FL 33463	
Current N	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
6132 ROYAL BIRKDALE DRIVE LAKE WORTH, FL 33463			SUITE 109	6132 ROYAL BIRKDALE DRIVE SUITE 109 LAKE WORTH, FL 33463	
FEI Number: 22-3865949		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1840 SW 2 4TH FLOO MIAMI, FL The above in the State	OR 33145 US e named entity e of Florida.		purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: Electronic Signature of Registered Agent			gent	 Date	
	mpaign Financin S AND DIREC	g Trust Fund Contribution ().	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KIRSCH, MAXI	IRKDALE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	KIRSCH, ETHE) Delete :L NRKDALE DRIVE	Title: Name: Address:	() Change () Addition	

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: MAXINE KIRSCH P 02/12/2003