2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Jul 20, 2006 08:00 AN		
DOCUMENT # P03000018295 1. Entity Name SUN MAX SERVICES, INC.				Secretary of State		
Principal Place of Business Mailing Address 1113 NW 117 AVE 1113 NW 117 AVE. CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071						
DO NOT WRITE IN THIS SPACE				07132006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 03-0535900 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required Fee Required		
6. Name and Address of Current Registered Agent						
JOHNSTON, RYAN L 6240 SW 38 ST.				DO NOT WRITE		
DAVIE, FL 33314			IN THIS SPACE			
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 egent and tille il applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOWIII FEE IS \$150.00 9. Election Campaign Finance Due by September 6, 2006 Trust Fund Contribution.				00 May Be ed to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTORS PD JOHNSTON, RYAN MR. 6240 SW 38 ST DAVIE, FL 33314		U00000571313 07/20/06-80001-021 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
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 exemptions contained in Chapter 119, 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:						

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