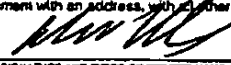


FILED  
May 02, 2005 8:00 am  
Secretary of State

02-18-2005 90048 036 \*\*\*150.00

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           |                                                                                                                               |                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P04000021256                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                           |                                              |                                                                                   |
| 1. Entity Name<br>FJ3-MAX, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           |                                                                                                                               |                                                                                   |
| Principal Place of Business<br>428 PLAZA REAL STE 224<br>BOCA RATON, FL 33432                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                           | Mailing Address<br>428 PLAZA REAL STE 224<br>BOCA RATON, FL 33432                                                             |                                                                                   |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                           | 3. Mailing Address                                                                                                            |                                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                           | Suite, Apt. #, etc.                                                                                                           |                                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                           | City & State                                                                                                                  |                                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country                                                                                                   | Zip                                                                                                                           | Country                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           | 4. FEI Number<br>20-1041599                                                                                                   |                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           | Applied For<br>Not Applicable                                                                                                 |                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                           | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                      |                                                                                   |
| 6. Name and Address of Current Registered Agent<br>MAX, DENNIS<br>428 PLAZA REAL STE 224<br>BOCA RATON, FL 33432                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                           | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                           |                                                                                                                               |                                                                                   |
| FILE NOW!! FEE IS \$150.00<br>After May 1, 2005 Fee will be \$550.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                           | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees               |                                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                           | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                         |                                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DENNIS MAY<br>244 BOCA RATON BLVD. Pres<br>BOCA RATON, FL 33432 <input type="checkbox"/> Delete           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | President <input type="checkbox"/> Change <input type="checkbox"/> Addition       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | PATTI MAY<br>420 E COCONUT PALM RD.<br>BOCA RATON, FL 33432 <input type="checkbox"/> Delete               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | Limited Partner <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | FREDERICK A STAMPONE<br>1017 NEERNESS DRIVE<br>MEADOWBROOK, PA 19046 <input type="checkbox"/> Delete Gen. | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | General Partner <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | JOSEPH P. STAMPONE<br>1390 TANGLEWOOD DRIVE<br>NORTH WALES, PA 19454 <input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | General Partner <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | JAMES FORSTER<br>105 BURGANDY CIRCLE<br>BLUEBEL, PA 19422 <input type="checkbox"/> Delete                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | General Partner <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | JOHN M. DePee<br>10519 NW 67 COURT<br>PARKLAND, FL 33076 <input type="checkbox"/> Delete                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                            | General Partner <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or without the empowered. |                                                                                                           |                                                                                                                               |                                                                                   |
| SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                           | DENNIS MAY Feb 15, 2005 561-392-0611                                                                                          |                                                                                   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                           | Date                                                                                                                          |                                                                                   |