

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033285

Entity Name: AGRIMAX CORPORATION

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

18090 COLLINS AVENUE
179
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

18090 COLLINS AVENUE
179
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

18090 COLLINS AVENUE
T-17, 179
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

18090 COLLINS AVENUE
T-17, 179
SUNNY ISLES BEACH, FL 33160

FEI Number: 20-0752479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLOREZ, RAMON
18090 COLLINS AVENUE
179
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

FLOREZ, RAMON
18090 COLLINS AVENUE
T-17, 179
SUNNY ISLES BEACH, FL 33160 US

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.

SIGNATURE:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: M () Delete
Name: FLOREZ, RAMON
Address: 5821 SW 13 ST
City-St-Zip: PLANTATION, FL 33317

Title: M () Delete
Name: GARCIA, AMANDA
Address: 5821 SW 13 ST
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: FLOREZ, RAMON
Address: 5821 SW 13 ST
City-St-Zip: PLANTATION, FL 33317

Title: MRS. (X) Change () Addition
Name: GARCIA, AMANDA
Address: 5821 SW 13 ST
City-St-Zip: PLANTATION, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RAMON FLOREZ

MR.

04/29/2009

Electronic Signature of Signing Officer or Director

Date