2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# P04000078352

Entity Name: MAXOUT STRENGTH SYSTEMS, INC.

Current Principal Place of Business:

2629 EDGEWATER DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

2629 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 20-1129758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, GORDON
1201 EAST ROBINSON STREET
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MAC MILLAN, MICHAEL
Address: 4964 SW 91ST DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: FADELEY, BRETT D
Address: 1378 SOUTH RIDGE LAKE CIR.
City-St-Zip: LONGWOOD, FL 32750

Title: D ( ) Delete
Name: BAXLEY, RICHARD D
Address: 2629 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete
Name: HARRIS, GORDON
Address: 1201 EAST ROBINSON STREET
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: BRUCE, JAMES
Address: 289 MEADOW BEAUTY TERRACE
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: DR. RICK BAXLEY OWNE 04/13/2007

Electronic Signature of Signing Officer or Director Date