

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000083713

FILED
Jan 14, 2008
Secretary of State

Entity Name: MAXIMUM TECHNOLOGY GROUP, INC.

Current Principal Place of Business:

1633 E. VINE STREET
STE. 212
KISSIMMEE, FL 34744

New Principal Place of Business:

1633 E. VINE STREET
SUITE. 212
KISSIMMEE, FL 34744 US

Current Mailing Address:

1633 E. VINE STREET
STE. 212
KISSIMMEE, FL 34744

New Mailing Address:

1633 E. VINE STREET
SUITE 212
KISSIMMEE, FL 34744 US

FEI Number: 26-1624655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIERA, NEYIBE E
1633 E. VINE STREET
STE. 212
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

VIERA, NEYIBE E
1633 E. VINE STREET
SUITE 212
KISSIMMEE, FL 34744 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:

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOSA, LAURA C
Address: 3002 SILVER WOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: VIERA, NEYIBE E
Address: 1633 E. VINE STREET - SUITE 212
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOSA, LAURA C
Address: 3002 SILVER WOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: D (X) Change () Addition
Name: VIERA, NEYIBE E
Address: 1633 E. VINE STREET - SUITE 212
City-St-Zip: KISSIMMEE, FL 34744 US

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: NEYIBE VIERA

MRS

01/14/2008

Electronic Signature of Signing Officer or Director

Date