2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

ANNOAL KEI OKI								Scerciary of State				
DOCUMENT # P04000173509 1. Entity Name MARK WATERMAN'S MAXIMUM AUTOMOTIVE, INC.									4-18-2005 905	-		
Principal Place of Business 1301 HWY 60 EAST LAKE WALES, FL 33853			13	Mailing Address 1301 HWY 60 EAST				20036462				
LANE WALES	, FL 33033		LA	ike wales, fl 3385	13			1 1 4 S (12 S)	Blir sidil dirii naili Dai		1 11/41 Filit 9 F1 1	EMPhi manii
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04142005	Chg-P	CR2I	E034 (10/03)		
City & State			City & State					4. FEI Number	2/62/79		}	pplied For ot Applicable
Zip			Zip		Coun	ountry			of Status Desired		\$8.75 Ad	ditional
- 6. Name and Address of Current Reg				egistered Agent			- 7. Name and Address of New Registered Agent					
The state of the s						Name						
WATERMAN, MARK 1301 HWY 60 EAST						Street Address (P.O. Box Number is Not Acceptable)						
LAKE WALES, FL 33853												
•		City					F	Zip Cod	le			
8. The above the obligat	named entity tions of regist	y submits this statement for ered agent.	or the pu	rpose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the State of Flo	rida. Tar	n familiar with.	and accept
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if	applicable (NOTE	Registered	f Agent signat	ure required	when reinstating)	 	DATE		
FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribution						ncing	\$ 5.	00 May Be ad to Fees				 .
10.		OFFICERS AND	DIRECT	TORS	11.			ADDITIONS/	CHANGES TO OFFI	CERS AN	ID DIRECTOR	S IN 11
TITLE	PSD			☐ Delete	TITLE						☐ Change	Addition
NAME	WATERMAN, MARK				NAME	ume)						_
STREET ADDRESS	1301 HWY 60 EAST				STREI	REET ADDRESS						
CITY-ST-ZIP	LAKE WALES, FL 33853			СПҮ		ST-ZIP	<u> </u>			_		
TITLE	TD			Delete	TITLE					_	☐ Change	☐ Addition
NAME	ı	AN, MARK JR			NAME							
STREET ADDRESS	1301 HWY					ET ADDRESS						
CITY-ST-ZIP		LES, FL 33853		_ 	CITY-	ST-ZIP	ļ					
TITLE	SD	411 1 104		Delete	TILE						Change	☐ Addition
NAME DIRECT ADDRESS	WATERM				NAME		ĺ				_	
STREET ADDRESS CITY-ST-ZIP	1301 HWY 60 EAST LAKE WALES, FL 33853					ST-ZIP						
TITLE	D (**= ****			☐ Delete	TITLE		 -				Change	Addition
NAME	 			LJ DOGG	NAME						Onlings	☐ Vogition
STREET ADDRESS	İ					T ADDRESS						
CITY-ST-ZIP					CITY-	ST-ZIP	<u>.</u>					
TITLE				☐ Delete	TITLE						Change	☐ Addition
NAME					NAME							
STREET ADDRESS]					T ADDRESS						
CITY-ST-ZIP					-	ST-ZIP			 			
TITLE NAME				☐ Delete	TITLE NAME						☐ Change	· 🗌 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attagrament with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE: 4

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR