

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000013250

Entity Name: MYMAX CORPORATION

FILED  
Oct 28, 2008  
Secretary of State

## Current Principal Place of Business:

4452 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

4424 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244

## Current Mailing Address:

4452 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244

## New Mailing Address:

4424 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244

FEI Number: 81-0661788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, GARY L SR  
4452 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244 US

## Name and Address of New Registered Agent:

WILLIAMS, GARY L SR  
4424 SWILCAN BRIDGE LANE  
JACKSONVILLE, FL 32244 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: GARY L. WILLIAMS

10/28/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILLIAMS, GARY L SR  
Address: 4452 SWILCAN BRIDGE LANE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP ( ) Delete  
Name: WILLIAMS, MAXINE W  
Address: 4424 SWILCAN BRIDGE LANE NORTH  
City-St-Zip: JACKSONVILLE, FL 32224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILLIAMS, GARY L SR  
Address: 4424 SWILCAN BRIDGE LANE  
City-St-Zip: JACKSONVILLE, FL 32244

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

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: GARY L. WILLIAMS

PD

10/28/2008

Electronic Signature of Signing Officer or Director

Date