2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015642

City-St-Zip:

FORT LAUDERDALE, FL 33306

FILED Jul 16, 2007 Secretary of State

Entity Name: MAAGE INC.			
Current Principal Place of Business:	New Principal Place	of Business:	
4720 NW 39TH ST LAUDERDALE LAKES, FL 33319	213 S.W RIDGECRES PORT ST. LUCIE, FL		
Current Mailing Address:	New Mailing Address	::	
P.O BOX 15825 PLANTATION, FL 33318	213 S.W RIDGECRES PORT ST. LUCIE, FL		
FEI Number: 04-3805398 FEI Number Appl	lied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Ag		f New Registered Agent:	
BURBANK, ARMANDO E 213 S.W RIDGECREST DRIVE PORT ST. LUCIE, FL 34953 US			
The above named entity submits this state in the State of Florida.	ment for the purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Re	egistered Agent	Date	
In accordance with s. 607.193(2)(b), F.S., the cor Election Campaign Financing Trust Fund Contril	•		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: D () Delete Name: FRANCOIS, ANTHONY A	Title: D Name: FRANCOIS.	(X) Change()Addition ANTHONY A	

4565 SW ULETA STREET 4720 NW 39TH ST Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33319 City-St-Zip: PORT ST. LUCIE, FL 34953 Title: () Delete Title: (X) Change () Addition VALERE, MARVIN D VALERE, MARVIN D Name: Name: Address: 1908 DISCOVERY CIR Address: 1908 DISCOVERY CIRCLE E. DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: BURBANK, ARMANDO E Name: BURBANK, ARMANDO E Address: 2881 NE 33 CT Address: 213 S.W RIDGECREST DRIVE

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.

City-St-Zip:

PORT ST. LUCIE, FL 34953

SIGNATURE: MARVIN VALERE 07/16/2007 D