## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000016422

Entity Name: MAXIMUS SALES INC

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

9497 S DIXIE HWY PMB 247 MIAMI, FL 331562933 9473 S DIXIE HWY MIAMI, FL 33156

**Current Mailing Address:** 

**New Mailing Address:** 

9497 S DIXIE HWY PMB 247 MIAMI, FL 331562933

9473 S DIXIE HWY MIAMI, FL 33156

FEI Number: 20-2248687

FEI Number Applied For ( ) FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MEIJERINK, SUSAN T 9497 S DIXIE HWY PMB 247

PMB 247 MIAMI, FL 331562933 US MEIJERINK, RONALDUS P 9473 S DIXIE HWY MIAMI, FL 33156 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: RONALDUS P.H. MEIJERINK

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete

 Name:
 MEIJERINK, RONALOUS P

 Address:
 9497 S. DIXIE HWY

 City-St-Zip:
 MIAMI, FL 331562933

Title: PD (X) Change ( ) Addition
Name: MEIJERINK, RONALDUS P
Address: 9473 S. DIXIE HWY
City-St-Zip: MIAMI, FL 33156

 Title:
 D
 ( ) Delete

 Name:
 MEIJERINK, SUSAN T

 Address:
 9497 S. DIXIE HWY

 City-St-Zip:
 MIAMI, FL 331562933

Title: VP (X) Change ( ) Addition Name: MEIJERINK, SUSAN T

Name: MEIJERINK, SUSAN Address: 9473 S. DIXIE HWY
City-St-Zip: MIAMI, FL 33156

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: RONALDUS P.H. MEIJERINK

PD

04/06/2009