

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000020994

Entity Name: MAUROMAX, INC.

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6614 GRANDE ORCHID WAY  
DELRAY BCH, FL 33446

**New Principal Place of Business:**

**Current Mailing Address:**

6614 GRANDE ORCHID WAY  
DELRAY BCH, FL 33446

**New Mailing Address:**

FEI Number: 14-1924244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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: T. BAEZ

04/13/2010

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: PRES  
Name: COSTELLO, ROBERT C  
Address: 6614 GRANDE ORCHID WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: V.P.  
Name: COSTELLO, MAURA K  
Address: 6614 GRANDE ORCHID WAY  
City-St-Zip: DELRAY BEACH, FL 33446

I hereby 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 all other like empowered.

SIGNATURE: ROBERT C. COSTELLO

PRES

04/13/2010

Electronic Signature of Signing Officer or Director

Date