

2007 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED

25
2-19-08

08 FEB 14 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000149464

1. Entity Name
MINI MAX MASSAGER, INC.



Principal Place of Business
2748 NE 10TH STREET
POMPANO BEACH, FL 33062

Mailing Address
2748 NE 10TH STREET
POMPANO BEACH, FL 33062

2. Principal Place of Business - No P.O. Box #
231 S. Hibiscus CT
Suite, Apt. #, etc.

3. Mailing Address
231 S. Hibiscus CT
Suite, Apt. #, etc.



11272007

REIN-P

CR2E098 (1/07)

07-08

City & State
Plantation, FL
Zip
33317
Country
USA

City & State
Plantation, FL
Zip
33317
Country
USA

4. FEI Number
20-3757396

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVY, ISRAEL
2748 NE 10TH STREET
POMPANO BEACH, FL 33062

7. Name and Address of New Registered Agent

Name
Levy, Israel
Street Address (P.O. Box Number is Not Acceptable)
231 S. Hibiscus CT
City
Plantation FL Zip Code
33317

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2008, Fee will be \$300.00

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
LEVY, ISRAEL
2748 NE 10TH STREET
POMPANO BEACH, FL 33062 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
RAGONE, KATHY
2748 NE 10TH STREET
POMPANO BEACH, FL 33062 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
-
- ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
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- ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
-
- ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
-
- ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
231 S. Hibiscus CT
Plantation, FL 33317 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
231 S. Hibiscus CT
Plantation, FL 33317 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
-
- ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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- ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP
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-
- ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
-
-
-
- ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #