

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000164832

Entity Name: AMAX INVESTMENTS, INC.

FILED
Jun 07, 2006
Secretary of State

Current Principal Place of Business:

124 WISTERIA DR.
LONGWOOD, FL 32779

New Principal Place of Business:

490 NORTH ST.
SUITE 108
LONGWOOD, FL 32750

Current Mailing Address:

124 WISTERIA DR.
LONGWOOD, FL 32779

New Mailing Address:

490 NORTH ST.
SUITE 108
LONGWOOD, FL 32750

FEI Number: 20-3837893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, PHILIP M
124 WISTERIA DR.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

ALLEN, PHILIP M
490 NORTH ST.
SUITE 108
LONGWOOD, FL 32750 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:

06/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, PHILIP M
Address: 124 WISTERIA DR.
City-St-Zip: LONGWOOD, FL 32779

Title: VP () Delete
Name: GOODMAN-ALLEN, LESLIE
Address: 124 WISTERIA DR
City-St-Zip: LONGWOOD, FL 32779

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, PHILIP M
Address: 490 NORTH ST. STE 108
City-St-Zip: LONGWOOD, FL 32750

Title: VP (X) Change () Addition
Name: GOODMAN-ALLEN, LESLIE
Address: 490 NORTH ST STE 108
City-St-Zip: LONGWOOD, FL 32750

Title: EVP () Change (X) Addition
Name: CARNES, THERESA M
Address: 490 NORTH ST. STE 108
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the 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: PHILIP M. ALLEN

P

06/07/2006

Electronic Signature of Signing Officer or Director

Date