

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042643

Entity Name: CHINA MAX SEMINOLE, INC.

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

250 TOWNE CIRCLE
SANFORD, FL 32771

New Principal Place of Business:

250 TOWNE CENTER CIR
SANFORD, FL 32771 US

Current Mailing Address:

250 TOWNE CIRCLE
SANFORD, FL 32771

New Mailing Address:

539 N MILLS AVE
ORLANDO, FL 32803 US

FEI Number: 20-4558989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEI, CHIAWEN
115 BOULDER CT
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

LIU, TUN M
9251 SOUTHERN BREEZE DR
ORLANDO, FL 32836 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: TUN M, LIU

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEI, CHIAWEN
Address: 115 BOULDER CT
City-St-Zip: SANFORD, FL 32771

Title: VPD () Delete
Name: WONG, BETTY
Address: 1817 WESTPOINTE CIRCLE
City-St-Zip: ORLANDO, FL 32835

Title: SD () Delete
Name: LIU, TUN MIN
Address: 9251 SOUTHERN BREEZE
City-St-Zip: ORLANDO, FL 32836

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LIU, TUN M
Address: 9251 SOUTHERN BREEZE DR
City-St-Zip: ORLANDO, FL 32836 US

Title: S (X) Change () Addition
Name: WONG, BETTY
Address: 1817 WESTPOINTE CIRCLE
City-St-Zip: ORLANDO, FL 32835 US

Title: D (X) Change () Addition
Name: TRAN, HIEN
Address: 6651 MERRYVALE LN
City-St-Zip: PORT ORANGE, FL 32128 US

Title: D () Change (X) Addition
Name: CHEN, ISRAE
Address: 1126 BARBADOS ST
City-St-Zip: DELTONA, FL 32725 US

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: TUN M. LIU

P

03/31/2009

Electronic Signature of Signing Officer or Director

Date