

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000060751

Entity Name: MAXIMUS SERVICES, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

1266 S. MILITARY TRAIL
UNIT 573
DEERFIELD BEACH, FL 33442 US

Current Mailing Address:

1266 S. MILITARY TRAIL
UNIT 573
DEERFIELD BEACH, FL 33442 US

FEI Number: 20-4781359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVEIRA, ARI T
1266 S MILITARY TRAIL
UNIT 573
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

777,RICH DR.
UNIT 106
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

777,RICH DRIVE
UNIT 106
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

OLIVEIRA, ARI T
777,RICH DR.
UNIT 106
DEERFIELD BEACH, FL 33441 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: ARI OLIVEIRA

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: OLIVEIRA, ARI T
Address: 1266 S MILITARY TRAIL UNIT 573
City-St-Zip: DEERFIELD BEACH, FL 33442 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARI OLIVEIRA

PR

04/21/2008

Electronic Signature of Signing Officer or Director

Date