## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000131109

Entity Name: MAXIM CUT INC

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1482 S PALM AVE 1460 S PALM AVE

PEMBROKE PINES, FL 33025 PEMBROKE PINES, FL 33025

Current Mailing Address: New Mailing Address:

1482 S PALM AVE 1460 S PALM AVE

PEMBROKE PINES, FL 33025 PEMBROKE PINES, FL 33025

FEI Number: 01-0875911 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MONTERROJAS, GIOVANA
1482 S PALM AVE

MONTERROJAS, GIOVANA
1460 S PALM AVE

PEMBROKE PINES, FL 33025 US PEMBROKE PINES, FL 33025 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: GIOVANA MONTERROJAS 01/08/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: D, P ( ) Delete
Name: MONTERROJAS, GIOVANA

Address: 1482 S PALM AVE

City-St-Zip: PEMBROKE PINES, FL 33025

 $\begin{array}{ll} \mbox{Title:} & \mbox{D, S} & (\ ) \mbox{ Delete} \\ \mbox{Name:} & \mbox{GUTIERREZAS, JULIO} \end{array}$ 

Address: 1482 S PALM AVE
City-St-Zip: PEMBROKE PINES, FL 33025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change ( ) Addition

Name: MONTERROJAS, GIOVANA

Address: 1460 S PALM AVE

City-St-Zip: PEMBROKE PINES, FL 33025

Title: D, S (X) Change () Addition

Name: GUTIERREZAS, JULIO

Address: 1460 S PALM AVE City-St-Zip: PEMBROKE PINES, FL 33025

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: GIOVANA MONTERROJAS PRES 01/08/2009