

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044568

Entity Name: MAX HEALTH CENTER INC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

1900 SW 126TH CT
MIAMI, FL 33175

New Principal Place of Business:

14225 SW 42 ST
MIAMI, FL 33175

Current Mailing Address:

1900 SW 126TH CT
MIAMI, FL 33175

New Mailing Address:

14225 SW 42 ST
MIAMI, FL 33175

FEI Number: 26-2018696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIDAL-ZAS, ALICIA
1900 S. W 126 CT
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

VIDAL-ZAS, ALICIA R
1900 S. W 126 CT
MIAMI, FL 33175 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: ALICIA R VIDAL-ZAS

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VIDAL-ZAS, ALICIA
Address: 1900 SW 126TH CT
City-St-Zip: MIAMI, FL 33175

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VIDAL-ZAS, ALICIA R
Address: 1900 SW 126TH CT
City-St-Zip: MIAMI, FL 33175

Title: S () Change (X) Addition
Name: LOMBANA, MELISSA R
Address: 1900 SW 126 CT
City-St-Zip: MIAMI, FL 33175

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: ALICIA R VIDAL-ZAS

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date