

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90021 018 ***150.00

DOCUMENT # P30022

1. Entity Name

MAXITILE, INC.

Principal Place of Business

Mailing Address

**E SANHILL AVE
 CARSON CA 90746**

**849 E SANHILL AVE
 CARSON CA 90746
 US**

2. Principal Place of Business

849 E. SANDHILL AVE

Suite, Apt. #, etc.

3. Mailing Address

849 E. SANDHILL AVE.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

95-3998636

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**A.G.C. CO.
 2300 SUN BANK CENTER
 200 SOUTH ORANGE AVENUE
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> Delete
NAME	DJURKLOU, NILS	
STREET ADDRESS	849 E SANDHILL AVE	
CITY-ST-ZIP	CARSON CA	
TITLE	CD	<input checked="" type="checkbox"/> Delete
NAME	ROLI, GUY	
STREET ADDRESS	HORACIO 1855,DESPACHO502	
CITY-ST-ZIP	COL. POLANCO, MEXICO	
TITLE	D	<input type="checkbox"/> Delete
NAME	ASTIER, ALBERT	
STREET ADDRESS	HORACIO 1855,DESPACHO502	
CITY-ST-ZIP	COL. POLANCO, MEXICO	
TITLE	D	<input type="checkbox"/> Delete
NAME	AJURKLOU, NILS	
STREET ADDRESS	17141 KINGSVIEW AVENUE	
CITY-ST-ZIP	CARSON CA 90746	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	AGUILERA, CARLOS	
STREET ADDRESS	HORACIO 1855,DESPACHO502	
CITY-ST-ZIP	COL. POLANCO, MEXICO	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALAIN DE METZ	
STREET ADDRESS	ALEJANDRO DUMAS NO. 103, 2° PISO	
CITY-ST-ZIP	COL. CHAPULTEPEC POLANCO, C.P. 11560 MEXICO, D.F.	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALEJANDRO DUMAS NO. 103, 2° PISO	
STREET ADDRESS	COL. CHAPULTEPEC POLANCO, C.P. 11560 MEXICO, D.F.	
CITY-ST-ZIP		
TITLE	DJURKLOU, NILS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	849 E. SANDHILL AVE	
STREET ADDRESS	CARSON, CA 90746	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDRES ESPINOSA	
STREET ADDRESS	ALEJANDRO DUMAS NO. 103, 2° PISO	
CITY-ST-ZIP	COL. CHAPULTEPEC POLANCO, C.P. 11560 MEXICO, D.F.	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-31-00

Date

310-217-0316

Daytime Phone #

CR2E034 (9/99)