FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

APPROVED AND FILED

PM 11:23

TALLAHASSEE, FLORIDA

DOCUMENT # P92000005617 (5)

1. Corporate Name
MAXIMUM TELECOMMUNICATIONS, INC.

Principal Address
3913 WISCONSIN AVE
TAMPA FL 33616

Mailing Address
3913 WISCONSIN AVE
TAMPA FL 33616

(Do Not Write In This Space)

3. Date Incorporated or Qualified: 11/18/1992
3a. Date of Last Report: 05/01/1994

2. Physical Place of Business
21

2a. Mailing Address
26

4. FEI Number: 59-3153453 — Applied For / Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 25 29 30

8. This corporation has liability for intangible tax under Chapter 199, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

WILLIAMS, TODD W
3913 WISCONSIN AVE.
TAMPA FL 33616

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, and 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE PVTS NAME WILLIAMS, TODD W ADDRESS 3913 WISCONSIN AVE. CITY TAMPA FL 33616	☐ Change ☐ Addition
TITLE D NAME WILLIAMS, BARBARA G ADDRESS 3913 WISCONSIN AVE. CITY TAMPA FL 33616	☐ Change ☐ Addition
TITLE NAME ADDRESS CITY	☐ Change ☐ Addition
TITLE NAME ADDRESS CITY	☐ Change ☐ Addition
TITLE NAME ADDRESS CITY	☐ Change ☐ Addition
TITLE NAME ADDRESS CITY	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is correct, to the best of my knowledge, and that I am authorized to execute this report as required by Section 607.1622, Florida Statutes. Further I hereby certify that the annual report or supplemental annual report to be filed herein is true and complete and that my signature shall have the same legal effect as if made under oath. That I am familiar with the provisions of, and the obligations imposed by, and that the corporation intends to comply with, Chapters 607, Florida Statutes, and that my name appears in Block 12 or Block 13 hereof as an officer or director with authority within the corporation.

SIGNATURE: Todd W. Williams / Todd W. Williams — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 4/29/95 — (813)837-6947

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