FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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1006	

P93000022972 (2)

DOCUMENT # Corporation Name MAXIMA IMPORT & EXPORT, CORP.



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Principal Place	of Business	Mailing Address					
2874 NW 72			2874 NW 72ND AVE. Miami Fl 33122 US				
MIAMI FL 3 US	3122				3. Date incorporated or Qualified 03/26/1993	3a. Date of Last Report 04/07/1995	
2. Principal Pla	ce of Business	2a. Mailing Addre	SS .			4. FEI Number 65-0474046	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zıp	Country	Zip		Country		8. This corporation has liability for i	ntangible tax under s. 199.032,
]	25	29	30			Florida Statutes	
L	9. Name and Address of Curre	nt Registered Agent			r	10. Name and Address of New R	egistered Agent
				81	Name		
MASSA, SERGIO 7921 SW 40TH ST #46					82 Street Address (P.O. Box Number is Not Acceptable)		
	FL 33155			83			
				84	City		85 Zip Code
						ration submits this statement for the pur	FL
II 2.	OFFICERS AI	ND DIRECTORS		13. 1 1 THLE		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
TITLE		L_J DELE		1 1 TITLE 1.2 NAME			Ghange [] Addition
IAME STREET ADDRESS	PEREZ, EDDIE 1625 SW 59TH AVE				1 ADORESS 2	274 NW 72AUE	
STY-ST-ZIP	MIAMI FL 33155			1.4 CITY-	ST-ZIP W	874 NW 72 AUE 11441, F1 33122.	
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 corrogation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the top of the corrogation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the top of the corrogation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR