

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000081934

1. Entity Name
MAKSON CORP.



Principal Place of Business
175 BRADLEY PLACE
PALM BEACH, FL 33480 US

Mailing Address
5 STONE WALL LANE
C/O FRED RAPAPORT
MAMARONECK, NY 10543 US

FILED
Feb 28, 2004 08:00 AM
Secretary of State



02202004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0546627

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAPAPORT, ROBERT D
175 BRADLEY PLACE
PALM BEACH, FL 33480

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000069999
03/01/04-80029-020 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RAPAPORT, FRED 175 BRADLEY PLACE PALM BEACH, FL 33480
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**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/20/04 914 381-0034