

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000064306 (0)

1. Corporation Name
MAXIMO HARBOR, INC.



Principal Place of Business: % ARSENAULT & REARDON, P.A. 10225 ULMERTON ROAD, SUITE 2 LARGO FL 34641
Mailing Address: % ARSENAULT & REARDON, P.A. 10225 ULMERTON ROAD, SUITE 2 LARGO FL 34641

3. Date Incorporated or Qualified: 08/15/1995
3a. Date of Last Report

2. Principal Place of Business: 21 3701 50th Avenue South, Suite, Apt. #, etc. 22
2a. Mailing Address: 26 3701 50th Avenue South, Suite, Apt. #, etc. 27
4. FEI Number: 59-3330571 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes [X] No []

9. Name and Address of Current Registered Agent: CORPORATION SERVICE COMPANY, 1201 HAYS STREET, TALLAHASSEE FL 32301-2525
10. Name and Address of New Registered Agent: 81 Name: John E. Staples, 82 Street Address: 3701 50th Avenue South, 83, 84 City: St. Petersburg, FL, 85 Zip Code: 33711

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 accept the obligations of, Chapter 607.0505, Florida Statutes.

SIGNATURE: [Signature] John E. Staples, Date: April 24th 1996

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS [] DELETE	1.1 TITLE	[] Change [] Addition
NAME	STAPLES, JACK	1.2 NAME	
STREET ADDRESS	% 10225 ULMERTON ROAD, #2	1.3 STREET ADDRESS	
CITY - ST - ZIP	LARGO FL 34641	1.4 CITY - ST - ZIP	
TITLE	[] DELETE	2.1 TITLE	[] Change [] Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	[] DELETE	3.1 TITLE	[] Change [] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	[] DELETE	4.1 TITLE	[] Change [] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	[] DELETE	5.1 TITLE	[] Change [] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	[] DELETE	6.1 TITLE	[] Change [] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] John E Staples, Date: 4/24/96, Phone: (813) 866-6553

CF2E034 (12/95)