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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000019679 (5)

MAX-PLUS USA, INC.

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 10 1997 8:00am Secretary of State



0127459

Principal Place of Business	Mailing Address		i tantene i tid tante aute datet mit	ate mittel tallen slitte Beete eilet	· • • • • • • • • • • • • • • • • • • •	
2500 HOLLYWOOD BLVD SUITE 215 HOLLYWOOD FL 33020	2500 HOLLYWOOD BLVD., HOLLYWOOD FL 33020-881			i		
			3. Date Incorporated or Qualified 03/04/1996		Report	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 65-069512	A A	pplied For	
1222 N.E. 4th Ave		4th Ave	65-067312		ot Applicabl	
Suite, Apt #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired	1 1	38.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing		May Be	
Fort Lauderdale, F		erdale, Fl Country	Trust Fund Contribution	······································	to Fees	
Zip Country Country 33304-1925 25 Broward	Zip 29 33304-192	L	This corporation has liability for Florida Statutes	r intangible tax under s X Yes 🔲 No	, 199.032,	
9, Name and Address of Curre		PLOWALC	10. Name and Address of New F			
LABOSSIERE, MARC		81 Name			,	
2500 HOLLYWOOD BLVD., SUITE (215	B2 Street Add	ress (P.O. Box Number is Not Accepte	able)		
HOLLYWOOD FL 33020		12	22 N.E. 4th Ave			
		83				
		84 City To		85 _Zip	Code	
		FC	rt Lauderdale		Code 3 0 4	
 Pursuant to the provisions of Sections 607 05 office or registered agent, or both, in the Sta 	502 and 607.1508, Florida Statuti te of Florida, Such change was a	es, the above-named corp authorized by the corpora	poration submits this statement for the tion's board of directors. I hereby acc	purpose of changing i ept the appointment as	its registere registered	
agent. I am familiar with, and accept the obli	igations of Section 607.0505, Fig	orida Statutes.		210/00	7	
GNATURE		c (ABOSSIKA		DATE		
Signar in Type to a provid Game of registered a OFFICERS A	ND DIRECTORS	Er Registered Agent signature requi	ADDITIONS/CHANGES TO OFF		8S IN 12	
TILE D	DELETE	1.1 TITLE	710011101107071111011011011011	Change	Addition	
ALESSARD, ROGER		1.2 NAME				
TREE LADURESS 3772 DESTOR #102, STE-FO	Υ	1.3 STREET ADDRESS				
FIVESTEZIE QUEBEC CANADA GIX 4J8		1.4 CITY - ST - ZIP				
TiE	DELETE	2.1 TITLE		☐ Change	Addition	
AM:		2.2 NAME				
IBEET ADCIPESS		2.3 STREET ADDRESS				
-(Y - \$1 - 2)P	Dist. per	2. 4 CITY-ST-ZIP			1 2 100	
TLE	L) DELETE	3.1 TITLE		Change	Additio	
AME		3.2 NAME				
TREELADORESS		3.3 STREET ADDRESS				
#14F	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change	Additio	
iAME		4. 2 NAME		U.M.go	Land Frederick	
TREET ADDRESS		4.3 STREET ADDRESS				
01Y - \$1 - ZIF		4.4 CITY-ST-ZIP				
ITLE	DELETE	5.1 TITLE		Change	Additio	
AME .		5.2 NAME		_		
THEFT ACCIDESS		5.3 STREET ADDRESS				
(FY+S1+ZIP		5.4 CITY-ST-ZIP	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			
TLF	DELETE	6.1 TITLE		☐ Change	Additio	
IAME		6.2 NAME				
THEEL ANDRESS		6.3 STREET ADDRESS				
CHTY - ST - ZVP		6 4 CHTY - ST - ZIP				
14. I do hereby certfy that the information supplenformation indicated on this annual report of Lam an officer or director of the corporation appears in Block 12 or Block 13 if changed,	r supplemental annual report is to or the receiver or trustee empow	rue and accurate and tha	t my signature shall have the same leg	gal effect as if made un	nder oath; th	