FIL	F	NOW:	FILING	FFF	AFTER	MAY	1ST IS	\$550	nn
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E	PROFIT RPORATION	FLORIDA DEPART	Alth AND	PHANO A			
į.	JAL REPORT	Secretary	Fills	PRIO			
	1999	DIVISION OF CO	DRPORATIONS	99 FEB 12 AM	- R: 10		
DOCU 1. Corporatio	MENT # PUWO	oo Mouri	551 CO 12 RO	. 0.10			
	Max Industrials,	Inc.	SECRETARY OF TALLAHASSEE, F	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Plac	e of Business	Mailing Address					
	2875 NE 191 StreepH1 Aventura, FL 331	Miami,	. .	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifi d			
2. Principal P	Place of Business	2a. Mailing Address	08/30/96 4. FEI Number	Arolad For			
21	auce of positiess	26		65-0700858	Applied For Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	te	City & State		6. Election Campaign Financir			
Zip	Country	28]	Country	Trust Fund Contribution	Added to Fees		
24	25	29 3	8. This corporation owes the current year Intangible Personal Property Tax. [Yes [No				
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of Nev	w Registered Agent		
	Premier Asset Man	nagement, Inc.		Address (P.O. Box Number is Not Acce	otable)		
	2100 Park Central Suite 900	I Blvd., N	83				
	Pompano Beach, Fl	L 33064					
			84 City		FL 85 Zip Code		
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	f Florida. Such change was autl	norized by the corpo	corporation submits this statement for t reation's board of directors. Thereby ac-	ne purpose of changing its registered lept the appointment as registered		
agent. i a SiGNATURE	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	ia Statutes.				
12.	Signature, typed or printed name of registered agent OFFICERS AND		egistered Agent signature re		DATE OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	11 TITLE	7,000	[Change [Addition		
NAME	Jack Azout		12 NAME				
STREET ADDRESS CITY-ST-ZIP	3802 NE 207th St		1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	80000 -02	1277831841 /17/9901007012		
TITLE	Aventura, FL 331	O [] DELETE	2 1 TITLE		/27783164 /17/99-01067-012 *158.75 *****158.75**		
NAME STREET ADDRESS	SD Gilda Azout		2 2 NAME 2 3 STREET ADDRESS				
CITY-ST-ZIP	3802 NE 207th St	reet #1502	2 4 CITY-ST-ZIP				
TITLE	Aventura, FL 3318		31 TITLE		[] Change [Addition		
NAME STREET ADORESS			3.2 NAME 3.3 STREET ADDRESS				
CITY-ST-ZIP			34 CITY-ST-ZIP		. <u>.</u>		
TITLE		[] DELETE	41TITLE		[] Change [] Addition		
NAME STREET ADORESS			4.2 NAME 4.3 STREET ADDRESS				
CTY-ST-ZIP			4.4 CITY-S1-ZIP				
Lift E		[_] DELETÉ	5 1 TITLE 5 2 NAME		[Change [Addition		
STREET ADDRESS			53 STREET ADDRESS		• 10		
CITY-ST-ZIP		Flance	54 CITY-ST-ZIP		100		
TITLE NAME		☐ DELETE	6.1 TITLE 6.2 NAME		Change (P) Nadition		
STREET ADDRESS			63 STREET ADDRESS				
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for the	64 CITY-ST-ZIP	in Section 110 07/3/6) Florida Statuta	s. I further certify that the information		
indicated	pertify that the information supplied with on this annual report or supplemental a director of the corporation or the receiv	innual report is true and accura	te and that my signa	sture shall have the same legal effect a	s if made under oath, that I am an		
	or Block 13 if changed, or on an attach				. 1		
SIGNAT		RINTED NAME OF SIGNING OFFICER OF	mt uza	ut 2/5/99	(305)135-5175		
	SOUNTING AND TIPED ON I	ASSESSMENT OF SIGNING OFFICER OF	, DIVENTOR	j - Dane	у следани в попен		