

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 20, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000090391 1. Entity Name OPTIMAX, INC.	
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Principal Place of Business 433 PLAZA REAL SUITE 275 BOCA RATON, FL 33432	Mailing Address 433 PLAZA REAL SUITE 275 BOCA RATON, FL 33432
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07272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0707382	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BLOCH, STUART E 980 NORTH FEDERAL HIGHWAY SUITE 412 BOCA RATON, FL 33432
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LIPSITZ, BERNARD D 4301 N. OCEAN BLVD. APT A 602 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BENDER, DOUGLAS A 2484 NW 59TH ST., UNIT 1103 BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Bernard Lipsitz **BERNARD LIPSITZ** 8/15/07 561-447-8842
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #