## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # P97000018076



MAXI'S INVESTMENT CORPORATION

Principal Place of Business 10825 SW 112TH AVE SUITE 210 MIAMI, FL 33176 US

1. Entity Name

Mailing Address

10825 SW 112TH AVE

SUITE 210

MIAMI, FL 33176 US

050520	
	050520

60043274

**FILED** 

May 22, 2008 8:00 am Secretary of State

05-22-2008 90016 027 \*\*\*150.00

2. Principal Place of Business - No P.O. Box # 3.				Mailing Address									
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.			05052008	Chg-P	CR2E0	34 (12/06)			
City & Stat	е		C	City & State				4. FEI Number Applied For					
								65-0737233 Not Applicable					
Zip		Country	2	Zip Country				5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Curren	t Registe	ered Agent	•			7. Name and	Address of Nev	w Registered	Agent		
						Name	-	-					
SANCHEZ, JULIA 10825 SW 112 NE SUITE 210 MIAMI, FL 33176						Street Address (P.O. Box Number is Not Acceptable)							
						City				FL	Zip Cod	6	
	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.												
trie obligat	ions or regisi	tered agent.											
SIGNATURE_													
	Signature, typed	for printed name of registered ager	nt and bile if	applicable. (NO	TE: Registere	ed Agent signature	required	when reinstating)	, <del></del> -	DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008								.00 May Be ed to Fees	In accordance corporation of	e with s. 607 lid not receiv	'.193(2)(b), e the prior	F.S., the notice	
10.		OFFICERS AND	DIREC	TORS	11.			ADDITIONS	/CHANGES TO C	OFFICERS AND	DIRECTOR	S IN 11	
TITLE	PSD	211		☐ Delete	ŧπι	.E		<u> </u>			☐ Change	Addition	
NAME	PACHEC	O, MAXIMILIANA A			NAM	4E							
STREET ADDRESS	1	V 112TH AVE SUITE 2	210			EET ADDRESS							
CITY-ST-ZIP	MIAMI, FL	_ 33176			CITY	r-ST-ZIP							
THLE	VTD			□ Delete	TITL	.E					Change	☐ Addition	
NAME	SANCHE				NAM	- 1							
STREET ADDRESS	I	V 112TH AVENUE, SU	JITE 210	)		EET ADDRESS							
CITY-ST-ZIP	MIAMI, FL	L 33176			CITY	r-ST-ZIP				<del></del>			
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TITLE NAME				Delete	TITL						☐ Change	Addition	
STREET ADDRESS						EET ADDRESS							

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 it made under oath; that I am an officer or director of the corporation or the receiver or trustes 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 a declarate, with fail other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

05-17-08

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