## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000020253

Entity Name: ARAMAX, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8566 FOREST OAKS BLVD 8900 KEATS DR. SUITE 7 HUDSON, FL 34667

SPRINGHILL, FL 34606

Current Mailing Address: New Mailing Address:

8566 FOREST OAKS BLVD
8900 KEATS DR.
SUITE 7
SPRINGHILL, FL 34606
8900 KEATS DR.
HUDSON, FL 34667

FEI Number: 59-3424046 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLOMON, SALVATORE
9278 GERONA ST.
SPRINGHILL, FL 34608 US
SOLOMON, SALVATORE
8900 KEATS DR.
HUDSON, FL 34667 US

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.

SIGNATURE: SALVATORE SOLOMON 03/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete Title: (X) Change ( ) Addition SOLOMON, SALVATORE SOLOMON, SALVATORE Name: Name: 9278 GERONA ST Address: 8900 KEATS DR. Address: City-St-Zip: SPRINGHILL, FL 34608 City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE SOLOMON PVD 03/24/2009