

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000034390

1. Corporation Name

C-MAX CAPITAL CORPORATION

Principal Place of Business
6126 PARADISE POINT DRIVE
MIAMI FL 33157

Mailing Address
6126 PARADISE POINT DRIVE
MIAMI FL 33157

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1998

4. FFI Number

☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

20. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATSON, MARC M
6126 PARADISE POINT DRIVE
MIAMI FL 33157

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE D WATSON, MARC M 6126 PARADISE POINT DRIVE MIAMI FL 33157 2. TITLE D WATSON, KEVIN 6126 PARADISE POINT DRIVE MIAMI FL 33157 3. TITLE [] DELETE 4. TITLE [] DELETE 5. TITLE [] DELETE 6. TITLE [] DELETE 7. TITLE [] DELETE 8. TITLE [] DELETE 9. TITLE [] DELETE 10. TITLE [] DELETE 11. TITLE [] DELETE 12. TITLE [] DELETE 13. TITLE [] DELETE 14. TITLE [] DELETE 15. TITLE [] DELETE 16. TITLE [] DELETE 17. TITLE [] DELETE 18. TITLE [] DELETE 19. TITLE [] DELETE 20. TITLE [] DELETE 21. TITLE [] DELETE 22. TITLE [] DELETE 23. TITLE [] DELETE 24. TITLE [] DELETE 25. TITLE [] DELETE 26. TITLE [] DELETE 27. TITLE [] DELETE 28. TITLE [] DELETE 29. TITLE [] DELETE 30. TITLE [] DELETE 31. TITLE [] DELETE 32. TITLE [] DELETE 33. TITLE [] DELETE 34. TITLE [] DELETE 35. TITLE [] DELETE 36. TITLE [] DELETE 37. TITLE [] DELETE 38. TITLE [] DELETE 39. TITLE [] DELETE 40. TITLE [] DELETE 41. TITLE [] DELETE 42. TITLE [] DELETE 43. TITLE [] DELETE 44. TITLE [] DELETE 45. TITLE [] DELETE 46. 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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other two empowered

SIGNATURE:

Marc M. Watson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/19/99

805-567-0065