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Secretary of State
05-01-2002 91518 007 ***150.00

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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000058124

1. Entity Name
MAXIE, INC.
229 FRANKLINST.
OCOEE, FL. 34761

DO NOT WRITE IN THIS SPACE

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
229 FRANKLIN ST.		295 N. LAKESHORE DR.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: OCOEE, FLORIDA		City & State: OCOEE, FLORIDA	
Zip: 34761	Country: USA	Zip: 34761	Country: USA

4. FEI Number: 59-3526992 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. **Name and Address of Current Registered Agent**
Name: PAT BOND (PATRICIA)
Street Address (P.O. Box Number is Not Acceptable): 295 N. LAKESHORE DR.
City: OCOEE, FLORIDA — Zip Code: 34761

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.

SIGNATURE: Patricia (Pat) Bond - Sec/Trea. PATRICIA PAT BOND — May 21, 2002
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating — DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, P ALLEN BOND - CHANGE 295 N. LAKESHORE DR. OCOEE, FL. 34761	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, S, T PAT BOND - CHANGE 295 N. LAKESHORE DR. OCOEE, FL. 34761	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

Patricia (Pat) Bond — PATRICIA (PAT) BOND — April 17, 2002 — 407/877-2992
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #