2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 24, 2004 8:00 am DOCUMENT # P98000107775 **Secretary of State** 03-24-2004 90024 019 ***150.00 MAXI REALTY, INC. Principal Place of Business Mailing Address 1122 EAST ATLANTIC AVENUE 1122 EAST ATLANTIC AVENUE ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ SUITE #2 SUITE #2 -DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483 2. Principal Place of Business 3. Mailing Address 201 E AVE STE 7 201 E AVE STE 7 Suite, Apt. #, etc. Suite, Apt. #, etc. 03112004 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For City & State LANTANA, FL 65-0881338 Not Applicable LANTANA. FL 33462 Country Country \$8.75 Additional 5. Certificate of Status Desired 33462 US US 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GAUSSEN, YVETTE I 201 E AVE STE 7 Street Address (P.O. Box Number is Not Acceptable) 404 ROYAL PARK DRIVE SUITE 3B LANTANA, FL _ET_LAUDERDALE, FL 33305_ 33462 Zip Code City 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_ Signature, typed or pricted name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE Delete TITLE GAUSSEN, YVETTE Change ■ Addition GAUSSEN, YVETTE I NAME MARIE 201 E. Ave STE 7 1122 E. ATLANTIC AVE SUITE #2 STREET ADDRESS STREET ADDRESS LANTANA, FL 33462 DELRAY BEACH, FL 33483 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete ΠIF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP. CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 empewered 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 afactment with an address, with all other like empowered. 3/12/04 A YVETTE GAUSSEN Daytime Phone

FILED