2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 28, 2006 08:00 AM DOCUMENT # P99000033298 Secretary of State MAXDAD, INC. Principal Place of Business Mailing Address C/O DAVID CRUZ, REALTOR, COLDWELL BANKER C/O DAVID CRUZ, REALTOR, COLDWELL BANKER 1500 SAN REMO AVE., STE. 110 1500 SAN REMO AVE., STE. 110 CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 CR2E034 (11/05) 02202006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2359035 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CRUZ, DAVID REALTOR DO NOT WRITE COLDWELL BANKER 1500 SAN REMO AVE., STE. 110 IN THIS SPACE CORAL GABLES, FL 33146 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 printed name of registered egent and tide if applicable (NOTE, Registered Agent signature required when reinstating) 1100000451571 03/10/08-80064-006 150.00 **\$5.00** May Be 9. Election Campaign Financing FILE NOW!! FEE 13 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10 OFFICERS AND DIRECTORS 100E NAME DERBIER, MARIE-FRANCE 1102-1130 WEST PENDER ST-FRENCH CONSULTATE STREET AUTORESS CITY-ST-ZIP VANCOUVER BC V6E-4A4 CANADA, STELE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-20P IIILE NAME STREET ADDRESS CATY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 the 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MALIE MOULL DERSIER

FILED