

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V53363**

(0)

1. Corporation Name
MAXIMUM IMPACT, INC.

98 OCT -1 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**4101 RAVENSWOOD ROAD
SUITE 406
FT. LAUDERDALE FL 33312
US**

Mailing Address
**4101 RAVENSWOOD ROAD
SUITE 406
FT. LAUDERDALE FL 33312
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**FALTZ, DAVID
901 NW 8 AVE
2D
GAINESVILLE FL 32601**

3. Date Incorporated or Qualified

07/27/1992

4. FEI Number

59-3133992

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

4101 Ravenswood Rd

83

Suite 406

84

City Ft Lauderdale

FL

85 Zip Code
33312

11. Pursuant to the provisions of sections 607.0502 and 607.1608, 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **FALTZ, DAVID**
STREET ADDRESS **901 NW 8 AVE 2D**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **VT** ☐ DELETE

NAME **ABELES, ALAN**
STREET ADDRESS **901 NW 8 AVE 2D**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

4101 Ravenswood Rd #406

1.4 CITY-ST-ZIP

Ft Lauderdale FL 33312

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

4101 Ravenswood Rd #406

2.4 CITY-ST-ZIP

Ft Lauderdale FL 33312

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

700002655977-6

-10/05/98--01133--009

******150.00 ****150.00**

☐ Change ☐ Addition

14. 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 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.

SIGNATURE: **[Signature]**

SECRETARY REQUIRED

CR2E034 (5/98)



20/2

901 NW 8TH AVENUE
SUITE D-2
GAINESVILLE, FL 32601

WWW.LOGOMALL.COM/MAXIMPACT



ANNUAL REPORT FILINGS
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

To Whom It May Concern:

I am sending this letter to inform you that my corporation Maximum Impact, Inc. moved on 12/15/98 from 901 N.W. 8TH Ave suite D-2 Gainesville, FL 32601 to 4101 Ravenswood rd Suite 406 Ft. Lauderdale, FL 33312. I believe that our first notice for our corporate annual report went to the wrong address and we never received it. I spoke with Trevar B. and she told me to send in this letter along with a check for the original \$150.00, But that in the future whether we get this first notice or not we are still responsible to pay by 5/1 of every year. I appreciate your understanding in this matter and waiving of our penalty. If you have any questions or comments feel free to contact me @ 954-321-8600 x 161.

Sincerely,

Alan J. Abeles