

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000146167

**Entity Name:** CALIMAX CORP.

**Current Principal Place of Business:**

22 LAS FLORES  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

22 LAS FLORES  
BOYNTON BEACH, FL 33426 US

**FEI Number:** 20-5952242

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIOREAN, HORATIO CPRES  
22 LAS FLORES  
BOYNTON BEACH, FL 33426-8821 US

*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name CHIOREAN, HORATIO  
Address 22 LAS FLORES  
City-State-Zip: BOYNTON BEACH FL 33426

Title TRES  
Name CHIOREAN, HORATIO  
Address 22 LAS FLORES  
City-State-Zip: BOYNTON BEACH FL 33426

Title SECT  
Name CHIOREAN, KIMBERLY  
Address 22 LAS FLORES  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIR  
Name CHIOREAN, HORATIO  
Address 22 LAS FLORES  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIR  
Name CHIOREAN, KIMBERLY  
Address 22 LAS FLORES  
City-State-Zip: BOYNTON BEACH FL 33426

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** HORATIO CHIOREAN

**PRESIDENT**

**02/27/2014**

Electronic Signature of Signing Officer/Director Detail

Date