

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000003242

**FILED**  
**Apr 04, 2017**  
**Secretary of State**  
**CC9705006941**

**Entity Name:** MAZE CONSULTANTS & INVESTIGATIONS, INCORPORATED

**Current Principal Place of Business:**

921 SALEM STREET  
REAR, SUITE 2  
GROVELAND, MA 01834-1574

**Current Mailing Address:**

POST OFFICE BOX 397  
GEORGETOWN, MA 01833-0497 US

**FEI Number:** 04-2778066

**Certificate of Status Desired:** Yes

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

KOENIGSBERG, LINDA ESQ  
1900 CORAL WAY  
STE 303  
MIAMI, FL 33145-2661 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            CPT  
Name            MURPHY, ARTHUR JJR.  
Address        371 ANDOVER STREET  
City-State-Zip: GEORGETOWN MA 01833-1307

Title            S  
Name            MURPHY, JANICE L  
Address        371 ANDOVER STREET  
City-State-Zip: GEORGETOWN MA 01833-1307

*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:** ARTHUR J. MURPHY, JR.

**CPT**

**04/04/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date