


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000004580

1. Entity Name
INTERMAX TRADING CORP.



Principal Place of Business Mailing Address

2079 WANTAGH AVENUE 2079 WANTAGH AVENUE
 WANTAGH, NY 11793 WANTAGH, NY 11793

DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 22-2442891 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KOHLI, VIVEK
 8468 NW 77TH CT
 MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

03/19/05-80035-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	KOHLI, VIVEK
STREET ADDRESS	10845 SW 138TH
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	P
NAME	MANJREKAR, INDIRA
STREET ADDRESS	44 DANTE AVENUE
CITY-ST-ZIP	HICKSVILLE, NY 11801
TITLE	
NAME	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 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.

SIGNATURE: *Indira Manjrekar* 03/14/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #