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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000076112 (0)

1. Corporation Name

M & M SKIBA, INC.



Principal Place of Business

38445 DEERWOODS DRIVE
EUSTIS FL 32726

Mailing Address

38445 DEERWOODS DRIVE
EUSTIS FL 32726

3. Date Incorporated or Qualified
10/25/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

32736

Country

28

Zip

32736

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SKIBA, MATTHEW M
38445 DEERWOODS DRIVE
EUSTIS FL 32726

4. FEI Number
59-3206532

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code
32736

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Michele D. Skiba Michele D. Skiba Vice-President

4/29/96

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME SKIBA, MATTHEW M
STREET ADDRESS 38445 DEERWOODS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE D ☐ DELETE
NAME SKIBA, MICHELE D
STREET ADDRESS 38445 DEERWOODS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

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 President ☒ Change ☐ Addition
1.2 NAME Skiba, Matthew M.
1.3 STREET ADDRESS 38445 Deerwoods Dr.
1.4 CITY-ST-ZIP Eustis, FL 32736

2.1 TITLE Vice-President ☒ Change ☐ Addition
2.2 NAME Skiba, Michele D.
2.3 STREET ADDRESS 38445 Deerwoods Dr.
2.4 CITY-ST-ZIP Eustis, FL 32736

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Michele D. Skiba Michele D. Skiba 4/29/96 352-357-2325

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)