

02-03

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED


03 MAY 30 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900020545689
06/05/03--01071--018 **\$300.00

DOCUMENT # P99000076608

1. Entity Name
M & M DELIVERY SERVICES, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
201 SW 32nd AVE

3. Mailing Address
State, Apt. #, etc. Suite Apt. #, etc.

City & State
DEERFIELD BEACH

City & State

Zip *FL* Country *33442-2385* Zip Country

4. FEI Number
65-0943728

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

-Name *CAPITAL SERVICES GROUP, INC*

Street Address (P.O. Box Number is Not Acceptable)
822 SE 9th ST - PALM PLAZA

City *DEERFIELD BEACH* **FL** Zip Code *33441*

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]* Date *05/14/03*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature retained when reissuing.)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PRESIDENT MARCELO C. DA SILVA 201 SW 32nd AVE DEERFIELD BEACH, FL 33442</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>V. PRESIDENT MARIA I BROWN 201 SW 32nd AVE DEERFIELD BEACH, FL 33442</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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 637, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* Date *05/14/2003* 954 427 4770

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

CR2E034B (12/02)

gic/2

Attachment #

P99000076608

M & M DELIVERY SERVICES, INC.

201 SW 32nd AVE. - DEERFIELD BEACH, FL 33442-2385

05/14/2003

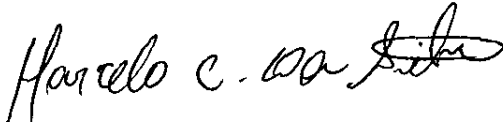
FLORIDA DEPARTMENT OF STATE
Glenda E. Hood - Secretary of State
DIVISION OF CORPORATIONS
P.O. BOX 1500
Tallahassee, Fl 32302-1500

Dear Ms. Glenda E. Hood;

I would like to clarify that I never received any bill nor notice from this Department regarding 2002 and 2003 UBR. I am sorry for lacking the knowledge that is an annual bill that I have to file even if I do not receive a bill from you.

I am hereby requesting that you REINSTATE my company, I am attaching the reinstatement form duly signed plus a check for the 2002 and 2003 annual fee according to the instructions we received from this department.

Sincerely;



Marcelo C. da Silva
President

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