

267204

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Annual Report

Filed 8-5-92

2 pgs.

37

CORPORATION  
B-5852  
ANNUAL REPORT  
1992  
08-05-92



61-25 C A  
FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
SEC. OF STATE  
CORPORATIONS DIV.  
LLAMASSEE, FLA.  
FILED  
AUG-5'92

Read Instructions on Other Side Before Making Entries

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #267204 (6)**  
**M M DEVELOPMENT CORP.**  
**16500 NW 52ND AVE**  
**HTALEAH FL 33014-6214**

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. A P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3. Date Incorporated or Qualified To Do Business in Florida **02/15/1963**

3a. Date of Last Report **06/28/1991**  
4. FEI Number **59-0998858**  
FEI Number Applied For  
FEI Number Not Applicable  
5. **\$8.75** Additional Fee required for a Certificate of Status  
CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1x P/D	MILGRAM, EUGENE	16500 N.W. 52 AVE.	MIAMI, FL.
2 S/D	MILGRAM, CHARLOTTE	16500 N.W. 52 AVE.	MIAMI, FL.
3x Asst Sec.	PAUL ROBINSON	1590 NE 162 St	North Miami Beach FL
4			
5			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent  
**MILGRAM, EUGENE -**  
**16500 N.W. 52ND AVE.**  
**MIAMI, FL 33014**

8. Name and Address of New Registered Agent  
81 Name **PAUL ROBINSON**  
82 Street Address 1 (Do NOT Use P.O. Box Number) **1590 NE 162 St**  
83 Street Address 2 (Do NOT Use P.O. Box Number) **Suite 700**  
84 City **North Miami Beach FL.** 85 Zip Code **33162**

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, or Sections 617.0502 and 617.1508, 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.

REGISTERED AGENT'S SIGNATURE *[Signature]* DATE **7/31/92**

10. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information on the public tax.)

11. I certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 6 of this attachment with an address.

SIGNATURE *[Signature]* DATE **7/31/92**  
Print/Type Name of Signing Officer or Director **PAUL ROBINSON** Title(s) **Assistant Secretary** Date of Telephone Number **(305) 949 5880**

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.

CR2E034 (6/92)