

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 02, 2004 08:00 AM  
Secretary of State

DOCUMENT # 377753

1. Entity Name

MANAGEMENT-MAINTENANCE, INC.



Principal Place of Business

C/O FREISTAT & ASSOCIATES  
16211 N. E. 18 AVE/  
N. MIAMI BEACH FL 33162  
US

Mailing Address

C/O FREISTAT & ASSOCIATES  
16211 N. E. 18 AVE  
N. MIAMI BEACH FL 33162  
US



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1318843

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FRANKLIN, GERALD  
C/O FREISTAT & ASSOCIATES  
16211 NE 18TH AVE.  
N. MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

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 PD ☐ Delete  
NAME FRANKLIN, GERALD  
STREET ADDRESS 1143 CREEKSIDE VILLAGE WAY  
CITY - ST - ZIP SEYMOUR TN 37865

TITLE VD ☐ Delete  
NAME CHAYKIN, LOUIS  
STREET ADDRESS 1402 MARINER WAY  
CITY - ST - ZIP HOLLYWOOD FL 33019

TITLE ST ☐ Delete  
NAME FRANKLIN, BARBARA  
STREET ADDRESS 1143 CREEKSIDE VILLAGE WAY  
CITY - ST - ZIP SEYMOUR TN 37865

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS U000000025649  
CITY - ST - ZIP 02/02/04-80114-016 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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NAME  
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CITY - ST - ZIP

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:

*Gerald Franklin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/04

(865) 609-2138  
Date Daytime Phone #