

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 377753

1. Entity Name
MANAGEMENT-MAINTENANCE, INC.



Principal Place of Business
**18205 BISCAYNE BLVD
2226
AVENTURA, FL 33160 US**

Mailing Address
**18205 BISCAYNE BLVD
2226
AVENTURA, FL 33160 US**



08062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1318843

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FRANKLIN, GERALD
18205 BISCAYNE BLVD
2226
AVENTURA, FL 33160**

**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 renewing)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

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
**PD
FRANKLIN, GERALD
1143 CREEKSIDE VILLAGE WAY
SEYMOUR, TN 37865**

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000573822
08/09/06-80002-021 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald Franklin
8/7/06 865
409-2138