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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 397799

1. Corporation Name

M & M NELSON ENTERPRISES, INC.

	_					
Principal Place	e of Business	Mailing Address				
374 BAHIA AVE. 374 BAHIA AVE.						
KEY LARGO FL 33037-4338 KEY LARGO FL 33037-4338						DO NOT WRITE IN THIS SPACE
						Date Incorporated or Qualifed
						03/21/1972
		0 44.9° Adda.a				4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address						59-1380278 Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required
City & State	e	City & State				6. Election Campaign Financing S5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	·	30			Personal Property Tax. Yes No
24]	9. Name and Address of Curren		<u> </u>			10. Name and Address of New Registered Agent
		<u> </u>		81	Name	
NELSON, MURRAY E						(D.C. Day Number is Not Assessable)
374 BAHIA AVENUE				82	Street Addr	ress (P.O. Box Number is Not Acceptable)
KEY LARGO FL 33037			ŀ	83		
				84 City FL 85 Zip Code		
l office or r	edistered agent or both in the State.	of Florida. Such change was at	uthorizea	ז עם ו	ine corporatio	poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	rida Statu	ites.		
SIGNATURE						ed when reinstaling) DATE
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere OFFICERS AND DIRECTORS 13.			Agent	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		DELETE	13. 1,1 TIT	1 =		Change Addition
TITLE	STD	LJ DELETE				
NAME	NELSON, MARY D		12 NA		i	
STREET ADDRESS	374 BAHIA AVE		1.3 ST	REET	ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037-4338	F1 Bel ===	1.4 CI		-ZIP	. ☐ Change ☐ Addition
TITLE	PD	☐ DELETE	2.1 TIT			[_] Change
NAME	NELSON, MURRAY E		2.2 NA	ME		
STREET ADDRESS	374 BAHIA AVE		2.3 ST	REET	ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037-4338		2.4 CI	TY-ST	I-ZIP	
TITLE		☐ DELETE	3 1 TIT	TLE.		☐ Change ☐ Addition
NAME			3 2 NA	ME	İ	
STREET ADDRESS			3.3 ST	REET.	ADDRESS	
CITY-ST-ZIP			3.4. CI	TY-ST	r-zip	
TITLE		□ DELETE	4.1 TIT	LE		☐ Change ☐ Addition

CITY-ST-ZIP 14. 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 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, with all other like empowered.

. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE.

4,3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Change

Change

☐ Addition

☐ Addition