

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
 04-06-2001 90058 050 ***150.00

0694723

DOCUMENT # 440794

1. Entity Name

M & M AEROSPACE HARDWARE, INC.

Principal Place of Business

**10000NW 15TH TERRACE
 MIAMI FL 33172**

Mailing Address

**P.O. BOX 025263
 MIAMI FL 33102-5263**

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 **59-1498481**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MITTENTAG, PAUL
 1900 N.W. 89TH PL.
 MIAMI FL 33172**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
10000 NW 15 TERRACE

City

MIAMI

FL

Zip Code

33172

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **MITTENTAG, PAUL**
 STREET ADDRESS **1900 N.W. 89TH PL.**
 CITY-ST-ZIP **MIAMI FL**

TITLE **VST** ☐ Delete
 NAME **MITTENTAG, ADRIANNE**
 STREET ADDRESS **1900 N.W. 89TH PL.**
 CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☐ Delete
 NAME **RICKETTS, JAMES D.**
 STREET ADDRESS **1900 N.W. 89TH PLACE**
 CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☐ Delete
 NAME **OLECK, PETER M.**
 STREET ADDRESS **1900 N.W. 89TH PLACE**
 CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☐ Delete
 NAME **HEATHCOCK, MARK R.**
 STREET ADDRESS **1900 N.W. 89TH PLACE**
 CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☐ Delete
 NAME **Louis Lee**
 STREET ADDRESS **10000 NW 15 Terrace**
 CITY-ST-ZIP **MIAMI FL 33172**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **10000 NW 15 TERRACE**
 STREET ADDRESS **MIAMI, FL 33172**
 CITY-ST-ZIP **MIAMI, FL 33172**

TITLE **D** ☒ Change ☒ Addition
 NAME **10000 NW 15 TERRACE**
 STREET ADDRESS **MIAMI, FL 33172**
 CITY-ST-ZIP **MIAMI, FL 33172**

TITLE ☒ Change ☐ Addition
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 CITY-ST-ZIP **MIAMI, FL 33172**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **PAUL MITTENTAG**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/29/01

Daytime Phone #

305-592-5155

CR2E034 (10/00)