

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 17 1996 8:00 am
Secretary of State

DOCUMENT # F38866 (2)

1. Corporation Name

MMCD, INC.

Principal Place of Business

Mailing Address

2700 N. 29TH AVE. #308
STE. 308
HOLLYWOOD FL 33020

2700 N. 29TH AVE. #308
STE. 308
HOLLYWOOD FL 33020



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 3051 N 34 ST.

23 City & State

27 City & State

24 Zip

25 Country

28 Hollywood FL

29 33021

30 USA

3. Date Incorporated or Qualified
08/27/1981

3a. Date of Last Report
08/04/1995

4. FEI Number
59-2149938

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MISHKIN, KENNETH
2700 NORTH 29TH AVE.
STE. 308
HOLLYWOOD FL 33021

81 Name MISHKIN, KENNETH
82 Street Address (P.O. Box Number is Not Acceptable)
3051 N 34 STREET
83
84 City Hollywood FL 85 Zip Code 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

6/10/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MISHKIN, KENNETH
STREET ADDRESS 3051 N 34TH ST
CITY-ST-ZIP HOLLYWOOD, FL 00000

TITLE VPST
NAME MANISCALCO, VICTORIA
STREET ADDRESS 2700 N 29 AVE 308
CITY-ST-ZIP HOLLYWOOD FL

TITLE D
NAME MONTELEONE, RAYMOND
STREET ADDRESS 2700 NORTH 29TH AVE., STE. 308
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE D
NAME DIAMOND, JEFFREY
STREET ADDRESS 2700 NORTH 29TH AVE., STE. 308
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE D
NAME CALDER, DONALD
STREET ADDRESS 2700 NORTH 29TH AVE., STE. 308
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/96

(954) 961 8799

CR2E034 (3/96)