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Mar 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G96629

(2)

1. Corporation Name
MIMMI, INC.

Principal Place of Business
C/O SMITH HULSEY & BUSEY
225 WATER STREET, STE. 1800
JACKSONVILLE FL 32202

Mailing Address
C/O SMITH HULSEY & BUSEY
225 WATER STREET, STE. 1800
JACKSONVILLE FL 32202-5151



3. Date Incorporated or Qualified
04/18/1984

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number
59-2405705

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

SMITH HULSEY & BUSEY
225 WATER STREET,
1800 FIRST UNION NATL BANK TOWER
JACKSONVILLE FL 32202

81 Name

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

83

84 City

FL

85 Zip Code

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

Sign above, typed or printed name of registered agent and file if applicable

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

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	DELETE
NAME	UIBLE, JOHN D.	
STREET ADDRESS	225 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	STD	DELETE
NAME	BOWER, E. BRUCE	
STREET ADDRESS	225 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	CVD	DELETE
NAME	MCGRIFF, III W	
STREET ADDRESS	7785 BAYMEADOWS WAY #308	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VD	DELETE
NAME	SACKS, MICHAEL	
STREET ADDRESS	777 N.W. 72ND AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	DELETE
NAME	RAY, WENDELL E.	
STREET ADDRESS	777 N.W. 72ND AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	CEO	DELETE
NAME	RAY, WENDELL E.	
STREET ADDRESS	777 NW 72ND AVENUE	
CITY-ST-ZIP	MIAMI FL	

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 change or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

0029180

CR2E034 (9/96)