

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # H20346

(3)

1. Corporation Name
M&M MEDICAL, INC.

Principal Place of Business

3648 E INDS WAY
RIVARA BEACH
RIVERA BEACH FL 33404
US

Mailing Address

% STANLEY J. NARKIER
1803 AUSTRALIAN AVE. S. SUITE D
W. PALM BEACH FL 33409

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt. #, etc

26 Suite Apt. #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

NARKIER, STANLEY J.
1803 AUSTRALIAN AVE. S.
W. PALM BEACH FL 33409

Debate

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 City
84 Zip Code
MATTHEW GINEO
3648 E. IND. Way
Riviera Beach FL
33408

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 of Current Registered Agent and Florida Resident

Signature of New Registered Agent

1-99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PT	GINEO, MATTHEW	3648 E INDUSTRIAL WAY	RIVIERA BEACH FL

13.

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

200002768713--3

-02/08/99--01012--017

****900.00 ****900.00

Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 139.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental filing 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.

SIGNATURE: MATTHEW GINEO 4/22/98

FILED

99 JAN 28 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

98-99
20

3. Date Incorporated or Qualified

09/11/1984

4. FEI Number

59-2450735

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 owns or has paid the current year Intangible
Personal Property Tax due June 30

Yes No

10. Name and Address of New Registered Agent

CR2E034 (10/97)