## 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 # J93260

(4)

FILED Apr 27 1998 8:00am Secretary of State

M&M	CONSIGNMENT SHOP, IN	IC.			
Principal Place	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		TIBIK BIBII BIBII BIBIA BIBII KABI
% MARY TYRE 8267 SW 124 ST MIAMI FL 33156 US		% MARY TYRE 8267 SW 124 ST MIAMI FL 33156 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
2. Principal Place of Business		2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	09/16/1987 4. FEI Number	Applied For
21		26		65-0030391	Not Applicable
Suite, Apt. N. ejc. NO ChANGE		Suite, Apt # etc.	change	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		<b>6.</b> Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z <sub>I</sub> p 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
	9. Name and Address of Curre		1001	10. Name and Address of New Register	
TYI	RE, MARY		81 Name		
8267 SW 124 ST MIAMI FL 33156			B3	dress (P.O. Box Number is Not Acceptable)	'e
İ			84 City	<b>'</b> F	Sip Code
11. Pursuant office or reagent 1 a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	02 and 607, 1508, Florida State of Florida State of Florida Such change way attons of Section 607,0505,	lutes, the above-named co s authorized by the corpor Florida Statutes.	progration submits this statement for the purpose ation's board of directors. I hereby accept the	e of changing its registered appointment as registered
	Styreature, typed or printed name of registered ac		OTE: Registered Agent signature req		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME	PD Tyre, Mary	☐ DELETE	1.1 TITLE		Change Addition
STREET ADDRESS	8245 SW 124TH ST		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	GREENLEAF, MARION	_	2.2 NAME		<b></b>
STREET ADDRESS	8245 SW 124TH ST		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY - ST - ZIP		T pourt	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME PERSON ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME		_ preside	5.2 NAME		oneinge
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE	14 <u>-</u> 14	☐ Change ☐ Addition
NAME		-	6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		
A A					

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 supplienced 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.

SIGNATURE:

Maryos. Lyre

MARYL. Tyre

4/18/98

305-235-0958