

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90551 004 \*\*\*150.00

**DOCUMENT # K20850**

1. Entity Name  
**4-M ENTERPRISES, INC.**



Principal Place of Business  
**1528 SW 19TH AVENUE  
DEERFIELD BEACH FL 33442  
US**

Mailing Address  
**1528 SW 19TH AVENUE  
DEERFIELD BEACH FL 33442  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0043308**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MURPHY, PATRICIA M.  
5333 BUCKHEAD CIRCLE  
BOCA RATON FL 33486**

Name **MURPHY, PATRICIA M.**  
Street Address (P.O. Box Number is Not Acceptable)  
**1528 S.W. 19TH AVENUE**  
City **DEERFIELD BEACH FL** Zip Code **33442**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Patricia M. Murphy* **PRESIDENT Patricia M. Murphy** **1-22-03**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MURPHY, DENNIS M.</b> <b>5333 BUCKHEAD CIRCLE</b> <b>BOCA RATON FL 33486</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>1528 S.W. 19TH AVENUE</b> <b>DEERFIELD BEACH, FL 33442</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPS</b> <b>MURPHY, PATRICIA M.</b> <b>5333 BUCKHEAD CIRCLE</b> <b>BOCA RATON FL 33486</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>1528 S.W. 19TH AVENUE</b> <b>DEERFIELD BEACH, FL 33442</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MURPHY, DENNIS M., JR.</b> <b>5333 BUCKHEAD CIRCLE</b> <b>BOCA RATON FL 33486</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>1528 S.W. 19TH AVENUE</b> <b>DEERFIELD BEACH, FL 33442</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVT</b> <b>MURPHY, TIMOTHY M.</b> <b>5333 BUCKHEAD CIRCLE</b> <b>BOCA RATON FL 33486</b>	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>1528 S.W. 19TH AVENUE</b> <b>DEERFIELD BEACH, FL 33442</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

*Patricia M. Murphy* **PRESIDENT** **954-428-2490**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1-22-03**

Daytime Phone #

CR2E034 (10/02)