

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

5 MAY -1 PM 11:46

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # K81271

(4)

1. Corporate Name

M&M PLASTERING & STUCCO, INC.

Principal Place of Business

Mailing Address

**% DANIEL C. MELICHAR
1126 SW COLEMAN AVE
PORT ST LUCIE FL 34953**

**% DANIEL C. MELICHAR
1126 SW COLEMAN AVE
PORT ST LUCIE FL 34953**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/14/1989

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2946672

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

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MELICHAR, DANIEL C.
1126 SW COLEMAN AVE
PORT ST LUCIE FL 34953**

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 607.05(2) and 607.15(2), 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 a resident of the State of Florida and I am not a partner, officer or director of the corporation.

SIGNATURE

(Signature of person accepting appointment as registered agent)

(Signature of person accepting appointment as registered agent)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME
**PD
MELICHAR, DANIEL C.
1126 SW COLEMAN AVE
PORT ST LUCIE FL**

NAME
**VD
BLAINE, MICHAEL L.
1081 SE MONTERREY RD
STUART FL**

NAME
**ST
MELICHAR, JAN A.
1126 SW COLEMAN AVE
PORT ST LUCIE FL**

1. NAME ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. NAME ☐ Change ☐ Addition

4. NAME ☐ Change ☐ Addition

5. NAME ☐ Change ☐ Addition

6. NAME ☐ Change ☐ Addition

7. NAME ☐ Change ☐ Addition

8. NAME ☐ Change ☐ Addition

9. NAME ☐ Change ☐ Addition

10. NAME ☐ Change ☐ Addition

11. NAME ☐ Change ☐ Addition

12. NAME ☐ Change ☐ Addition

13. NAME ☐ Change ☐ Addition

14. NAME ☐ Change ☐ Addition

15. NAME ☐ Change ☐ Addition

16. NAME ☐ Change ☐ Addition

17. NAME ☐ Change ☐ Addition

18. NAME ☐ Change ☐ Addition

19. NAME ☐ Change ☐ Addition

20. NAME ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is verifiably true and correct and that the information is true and correct 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 manager 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 of this document, or on the attached form with an address.

SIGNATURE:

Daniel C. Melichar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel C. Melichar

4-26-95

(407)878-7018