

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

1999

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90032 049 ***158.75

DOCUMENT # **L33075** ✓

1. Corporation Name

M & M GROUP CORP.

Principal Place of Business

Mailing Address

NW 116 WAY
STE 12
FL 33178

9960 NW 116 WAY
STE 12
MIAMI FL 33178
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1989

4. FEI Number

65-0193339

Applied For

Not Applicable

5. Certificate of Status Desired

☒ KX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

~~CAMBERT, RENE M~~
~~3611 SW 139TH CT~~
~~MIAMI FL 33175~~

10. Name and Address of New Registered Agent

81 Name

Luis M. Espinosa

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

15522 N.W. 82nd Place

83

Miami Lakes, FL 33016

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

President Luis Espinosa 4/26/98

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

PDT
ESPINOSA, LUIS M

STREET ADDRESS

1331 SW 104 PASSAGE #201

CITY-ST-ZIP

MIAMI-FL

TITLE

DSV

STREET ADDRESS

CAMBERT, RENE

CITY-ST-ZIP

1273 SW 139TH PL

TITLE

MIAMI-FL

TITLE

VPDT

STREET ADDRESS

BEANE, REGINALD

CITY-ST-ZIP

5088 NW 81ST AVE

TITLE

CORAL SPRINGS FL 33067

STREET ADDRESS

CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

PDT

1.2 NAME

Espinosa, Luis M.

1.3 STREET ADDRESS

15522 N.W. 82 Place

1.4 CITY-ST-ZIP

Miami Lakes, FL 33016

2.1 TITLE

DSV

2.2 NAME

Cambert, Rene M.

2.3 STREET ADDRESS

9960 N.W. 116 Wat # 12

2.4 CITY-ST-ZIP

Miami, FL 33178

☒ Change ☐ Addition

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

René M. Cambert 1/26/99 (305) 863-6644

CR2E034 (11/98)