

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
103

RECEIVED
MAY 1 1995
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M10069**

(6)

1. Corporation Name

SUPER M. & M., INC.

Principal Office Telephone

P. O. BOX 440662
2640 S.W. 92ND PLACE
MIAMI FL 33144-7662

Principal Office Address

P. O. BOX 440662
2640 S.W. 92ND PLACE
MIAMI FL 33144-7662

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation (If subject)

01/16/1985

3a. Date of Last Report

04/28/1994

4. FIC Number

59-2484243

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 is not liable for adaptation fees under the Florida
Election Statutes ☒ Yes ☐ No

2. Principal Office Telephone

21

State, Apt. #

2a. Mailing Address

26

State, Apt. #

City, State

23

City, State

28

City

24

25

29

30

9. Name and Address of Current Registered Agent

**RODRIGUEZ, MIGUEL A.
680150021
MIAMI FL 33165**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (If 0) Box Number, if Not Applicable

83

84 City

FL

85

Zip Code

11. I, the undersigned, after being duly sworn, depose and say that the foregoing statement for the purpose of complying with the provisions of Chapter 190, Florida Statutes, was subscribed, signed, and the same was authorized by the corporation, and of their true content, and that the agent named in the foregoing report is the registered agent of the corporation.

SIGNATURE

12.

(OFFICERS AND DIRECTORS)

13.

ADDITIONAL INFORMATION (If any, list name, address, and telephone number)

NAME

**PD
RODRIGUEZ, MIGUEL A.
2640 S.W. 92ND PLACE
MIAMI FL**

STREET ADDRESS

CITY

NAME

**STD
GOMEZ, MARGARITA M.
2640 S.W. 92ND PLACE
MIAMI FL**

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

NAME

STREET ADDRESS

CITY

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-95