

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M34078** (9)

1. Corporation Name

FOUR M. INVESTMENT PROPERTIES, INC.



Principal Place of Business

**3450 CHASE AVENUE
MIAMI BEACH FL 33140**

Mailing Address

**3450 CHASE AVENUE
MIAMI BEACH FL 33140**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MIGNOCCHI, MICHAEL
3450 CHASE AVENUE
MIAMI BCH. FL 33140**

3. Date Incorporated or Qualified
06/23/1986

3a. Date of Last Report
02/20/1995

4. FET Number

59-2686437

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

10. Name and Address of New Registered Agent

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 (04)(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 familiar with and accept the obligation of, Section 607 (04)(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

12a. NAME

12b. TITLE

12c. STREET ADDRESS

12d. CITY, ST., ZIP

12e. NAME

12f. TITLE

12g. STREET ADDRESS

12h. CITY, ST., ZIP

12i. NAME

12j. TITLE

12k. STREET ADDRESS

12l. CITY, ST., ZIP

12m. NAME

12n. TITLE

12o. STREET ADDRESS

12p. CITY, ST., ZIP

12q. NAME

12r. TITLE

12s. STREET ADDRESS

12t. CITY, ST., ZIP

12u. NAME

12v. TITLE

12w. STREET ADDRESS

12x. CITY, ST., ZIP

12y. NAME

12z. TITLE

**PD
MIGNOCCHI, MICHAEL
3450 CHASE AVE
MIAMI BEACH FL
VD
MIGNOCCHI, MIRETTE
3450 CHASE AVE
MIAMI BEACH FL**

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13.

13a. NAME

13b. TITLE

13c. STREET ADDRESS

13d. CITY, ST., ZIP

13e. NAME

13f. TITLE

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13t. CITY, ST., ZIP

13u. NAME

13v. TITLE

13w. STREET ADDRESS

13x. CITY, ST., ZIP

13y. NAME

13z. TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(P)

2/10/95 5326110

CR2E034 (12/95)