2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Jan 08, 2004 Secretary of State

Entity Name: MIAMI MAINTENANCE MANAGEMENT COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business: 15861 HUNTRIDGE ROAD DAVIE, FL 333312559 US **Current Mailing Address: New Mailing Address:** P O BOX 660587 MIAMI SPRINGS, FL 33266 US FEI Number: 65-0572147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZALL, MICHAEL 15861 HUNTRIDGE ROAD DAVIE, FL 333312559 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ZAPPIS, JOHN ZAPPIA, JOHN Name: Name: Address: 1150 LEE WAGENER BLVD Address: 1150 LEE WAGENER BLVD City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: FORT LAUDERDALE, FL 33315 Title: Title: () Delete () Change () Addition Name: VARGO, BILL Name: Address: 950 SE 12 STREET Address: City-St-Zip: MIAMI, FL 33010 City-St-Zip: Title: () Delete Title: () Change () Addition ZALL, MICHAEL Name: Name: 15861 HUNTRIDGE ROAD Address: Address: City-St-Zip: DAVIE, FL 333312559 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: HOLLAND, SUSIE D Name: 7200 NW 19TH STREET Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: Title: Title: () Delete () Change () Addition DOYLE, DENNIS Name: Name: 8081 NW 31 STREET Address: Address: City-St-Zip: MIAMI, FL 33152 City-St-Zip: Title: () Delete Title: (X) Change () Addition MOHLER, GARY MATTHEWS, JEFF Name: Name: Address: 3727 NW 41ST STREET Address: 5415 NW 36TH STREET MIAMI, FL 33142 MIAMI, FL 33166 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL ZALL T 01/08/2004