

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004314

1. Entity Name

M.H.M.B. INC.

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90198 038 ****61.25

Principal Place of Business

1582 WATER DRIVE NE
 UNIT D
 PALM BAY FL 32905

Mailing Address

1582 WATER DRIVE NE
 UNIT D
 PALM BAY FL 32905

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fees Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALDRON, TOM D
 112 W NEW HAVEN AVE
 MELBOURNE FL 32901

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
 min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution.



\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME SAXTON, HOWARD
 STREET ADDRESS 455 COLLEN AVE NE
 CITY-ST-ZIP PALM BAY FL 32907 ☐ Delete

TITLE PD
 NAME LEON CATE
 STREET ADDRESS 1530 ELDRED BLVD SE
 CITY-ST-ZIP PALM BAY FL 32909 ☒ Change ☐ Addition

TITLE V
 NAME KEE, AL
 STREET ADDRESS 560 BELAIR AVE
 CITY-ST-ZIP MERRITT ISLAND FL 32953 ☐ Delete

TITLE V
 NAME KENNETH NUÑEZ
 STREET ADDRESS 440 NEPTUNE DR NE
 CITY-ST-ZIP PALM BAY FL 32907 ☒ Change ☐ Addition

TITLE D
 NAME MARR, HENRY
 STREET ADDRESS 2615 ARISTOCRAT DR
 CITY-ST-ZIP MELBOURNE FL 32901 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
 NAME PITMAN, WILLIAM
 STREET ADDRESS 2075 MICHELS DR NE
 CITY-ST-ZIP PALM BAY FL 32905 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
 NAME TRAMMELLE, AL
 STREET ADDRESS 887 VANCE CIRCLE NE
 CITY-ST-ZIP PALM BAY FL 32905 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
 NAME BERTSEN, ARNE
 STREET ADDRESS 1143 HERNE AVE NE
 CITY-ST-ZIP PALM BAY FL 32907 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM C PITMAN 8/5/02 321 724-8755

CR2E037 (4/02)