

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91179 001 ***150.00

0314750 AV

DOCUMENT # P00000029012

1. Entity Name

M.A.M. INVESTMENTS, CORP.



Principal Place of Business

**13301 SW 2ND STREET
MIAMI FL 33184**

Mailing Address

**13301 SW 2ND STREET
MIAMI FL 33184**

2. Principal Place of Business

13926 SW 47 Street

3. Mailing Address

13926 SW 47 Street

Suite, Apt. #, etc.

2nd Floor

Suite, Apt. #, etc.

2nd Floor

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33175

Country

USA

Zip

33175

Country

USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1045828

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MATTIA, ANTONIO
13301 SW 2ND STREET
MIAMI FL 33184**

7. Name and Address of New Registered Agent

Name

Mattia, Antonio

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

13926 SW 47 Street, 2nd Floor

City

Miami

FL

Zip Code

33175

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 **Antonio Mattia**

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

(NOTE: Registered Agent signature required when reinstating)

04/28/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **MATTIA, ANTONIO**
STREET ADDRESS **13301 SW 2ND STREET**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE **SD** ☐ Delete
NAME **MATTIA, ELVA**
STREET ADDRESS **13301 SW 2ND STREET**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE **VD** ☐ Delete
NAME **MATTIA, MARC A**
STREET ADDRESS **13301 SW 2ND STREET**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **Mattia, Antonio**
STREET ADDRESS **13926 SW 47 Street, 2nd Floor**
CITY-ST-ZIP **Miami, FL 33175**

TITLE **SD** ☒ Change ☐ Addition
NAME **Mattia, Elva**
STREET ADDRESS **13926 SW 47 Street, 2nd Floor**
CITY-ST-ZIP **Miami, FL 33175**

TITLE **VD** ☒ Change ☐ Addition
NAME **Mattia, Marc A**
STREET ADDRESS **13926 SW 47 Street, 2nd Floor**
CITY-ST-ZIP **Miami, FL 33175**

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

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

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

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 607, 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: **A. Mattia**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03

Date

305-551-2240

Daytime Phone #

CP2E034 (10/02)