

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90018 049 ***150.00

DOCUMENT # P01000074925

1. Entity Name

MPM Corporate Group, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
773 N.W. 167th Street

Suite, Apt. #, etc.

3. Mailing Address
773 N.W. 167th Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
65-1125831

Applied For
Not Applicable

Zip
33169

Country
USA

Zip
33169

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Hector Medina

Street Address (P.O. Box Number is Not Acceptable)
773 N.W. 167th Street

City Miami FL Zip Code 33169

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.

SIGNATURE  Pres. Hector Medina

(NOTE: Registered Agent signature required when reinstating)

3-4-02
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/D
NAME Hector Medina
STREET ADDRESS 600 N.W. 141st Avenue - Apt.108
CITY-ST-ZIP Pembroke Pines, FL 33028

TITLE V/P Asst Secy/T/D
NAME Alex Miranda
STREET ADDRESS 6710 N.W. 109th Court
CITY-ST-ZIP Miami, FL 33178

TITLE VP/S/D
NAME Joel Pinero
STREET ADDRESS 10065 Bay Harbor Drive
CITY-ST-ZIP Miami, FL 33154

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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Pres. Hector Medina

3-4-02 (305) 620-7720
Date Daytime Phone #

CR2E034B (12/01)