

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2003 8:00 am**  
**Secretary of State**

07-16-2003 90039 020 \*\*\*150.00

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**DOCUMENT # P02000116148**

1. Entity Name

**M.M.E. MARKETING INC.**



Principal Place of Business

**623 TURTLE RUN  
WESTON FL 33326**

Mailing Address

**623 TURTLE RUN  
WESTON FL 33326**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

**USA**

Zip

Country

**USA**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**13-4218196**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**AGUILERA, DAVID J  
623 TURTLE RUN  
WESTON FL 33326**

7. Name and Address of New Registered Agent

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

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**P/T  
AGUILERA, DAVID J  
623 TURTLE RUN  
WESTON FL 33326** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VS  
AGUILERA, GISELLE  
623 TURTLE RUN  
WESTON FL 33326** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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CITY - ST - ZIP  
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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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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 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:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/10/03**

**954 446 6852**

Date

Daytime Phone #

CR2E034 (4/03)

Attachment#

90143381

M.M.E. MARKETING INC.

07/10/2003

Florida Department of State  
Secretary of State  
Glenda E. Hood  
Division of Corporations

Dear Sir or Madam:

RE: MME Marketing Inc.

Document# P02000116148


As per our conversation, I did not receive any previous notice for 2003  
Uniform Business Report. (UBR)

I would appreciate you waving the penalties.

Enclosed please find a check for \$150.00 US for the annual report (\$61.25)  
and the annual supplemental corporate fee of (\$88.75).

I thank you for your prompt cooperation.

Sincerely,

  
David J. Aguilera  
President, Treasurer