

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000082766

1. Entity Name
MMD COMMUNICATIONS CORP.



FILED
05 NOV 28 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483

Mailing Address
1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10172005 REIN-P CR2E098 (6/04)

4. FEI Number

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DALY, MARION
1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483

Name

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

City

REINSTATEMENT 05
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 \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME PSTD
STREET ADDRESS DALY, MARION
CITY-ST-ZIP 1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483 ☐ Delete

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

TITLE
NAME V
STREET ADDRESS BRYANT, PETER
CITY-ST-ZIP 1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

BS 292

October 7, 2005

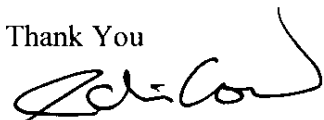
To Whom It May Concern:

Ref: MMD Communications Corp
801 S. Federal Hwy Suite 224
Delray Beach, FL 33483

We never received the original notice for renewal. Please accept this check as payment for the 2005 renewal period. Please include out suite #224 on all future notifications to insure proper delivery.

--If you have nay questions, you may reach us at 561-279-0605.

Thank You



Robin Coon
Office Manager