

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000082766

FILED
Aug 01, 2007
Secretary of State**Entity Name:** MMD COMMUNICATIONS CORP.**Current Principal Place of Business:**618 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408**New Principal Place of Business:****Current Mailing Address:**618 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408**New Mailing Address:****FEI Number:** 20-1171918**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BRYANT, PETER
618 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** PRES () Delete
Name: BRYANT, PETER
Address: 618 US HIGHWAY 1 SUITE 400
City-St-Zip: NORTH PALM BEACH, FL 33408**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SECR () Change (X) Addition
Name: COON, ROBIN L
Address: 618 US HWY 1 SUITE 400
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER BRYANT

PRES

08/01/2007

Electronic Signature of Signing Officer or Director_____
Date