


# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000002300					
1. Entity Name M & M FASTENERS, CORP.					
Principal Place of Business 2211 S.W. 136TH COURT MIAMI, FL 33175			Mailing Address 2211 S.W. 136TH COURT MIAMI, FL 33175		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address PO BOX 971668		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State MIAMI FLORIDA		
Zip	Country	Zip	Country	4. FEI Number 76-0812921	
33197	USA	33197	USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BETANCOURT, MARIA 2211 SW 136 COURT MIAMI, FL 33175				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 <i>Maria Betancourt</i> MARIA BETANCOURT DSTCL 2/15/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$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	PSTD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BETANCOURT, MARIA			NAME	300118451273
STREET ADDRESS	2211 SW 136 COURT			STREET ADDRESS	02/20/08--01034--005 **150.00
CITY-ST-ZIP	MIAMI, FL 33175			CITY-ST-ZIP	01/29/07 90066 038
TITLE		<input type="checkbox"/> Delete		TITLE	\$150.00
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME				NAME	REINSTATEMENT 07-08
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Maria Betancourt</i>				Date: 2/15/08 305 2991105	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	

FILED

08 FEB 21 AM 8:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02172008 REIN-P CR2E098 (1/07)



Phone: 305.299.2981 Fax: 305.253.3310

E-mail: [mmfastenerscorp@yahoo.com](mailto:mmfastenerscorp@yahoo.com)

P.O. Box 971668 Miami, FL 33197


2-15-08

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
CLIFTON BUILDING  
2661 EXECUTIVE CENTER CIRCLE  
TALLAHASSEE FL 32301  
TEL 850 245-6056  
RE:DOCUMENT # P06000002300

TO WHOM IT MAY CONCERN:

THIS LETTER IS TO FORMALLY ADVISE YOU THAT I DID NOT RECEIVED ANY RETURNED MAIL FROM YOU IN REGARDS TO THE MISSING INFORMATION ON THE 2007 PROFIT REPORT, PLEASE ACCEPT MY APOLOGY AND APPLY THE \$150 PAYMENT MADE ON 1-24-0 BY CHECK # 539 TO THE \$300 FEE FOR THE 2008 REINST REINSTATEMENT FORM. ENCLOSED WITH THIS YEAR PAYMENT & FORM. IF YOU NEED ANYTHING PLEASE DO NOT HESITATE TO CON CONTACT ME, ALSO PLEASE FIND MY NEW MAILING ADDRESS SINCE I HAVE BEEN HAVING PROBLEMS WITH ALL MY MAIL.

SINCERELY

  
MARIA BETANCOURT  
OWNER