

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000095944

Entity Name: NMM INC.

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7900 SW 57 AVE  
SUITE 26  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

7900 SW 57 AVE  
SUITE 26  
MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 20-5249909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ECHEVERRIA CALVO & ASSOCIATES  
7900 SW 57 AVE  
SUITE 26  
MIAMI, FL 33143 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: PSTD  
Name: CANESI, NICOLETTA  
Address: 7900 SW 57 AVE STE 26  
City-St-Zip: MIAMI, FL 33143

I hereby 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 all other like empowered.

SIGNATURE: NICOLETTA CANESI

P

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date