

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041884

FILED  
Sep 01, 2008  
Secretary of State

Entity Name: MINORITY MONEY MARKET CORP.

## Current Principal Place of Business:

3850 UNIVERSITY CLUB BLVD  
JACKSONVILLE, FL 32277

## New Principal Place of Business:

## Current Mailing Address:

3850 UNIVERSITY CLUB BLVD  
JACKSONVILLE, FL 32277

## New Mailing Address:

751 COTTAGE HILL DR E  
JACKSONVILLE, FL 32225

FEI Number: 20-8887028

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PIERRE, JESPER  
6965 GOLDBLOCKS LN  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

MONROSE, HERNS  
751 COTTAGE HILL DR E  
JACKSONVILLE, FL 32225 US

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: HERNS MONROSE

09/01/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CHERY, MAURISSAINT JN I  
Address: 1060 3RD AVE N  
City-St-Zip: NAPLES, FL 34102

Title: CHR ( ) Delete  
Name: LAGUERRE, JONEL  
Address: 3850 UNIVERSITY CLUB BLVD  
City-St-Zip: JACKSONVILLE, FL 32277

Title: SEC ( ) Delete  
Name: MONROSE, HERNS  
Address: 751 COTTAGE HILL DR E  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Delete  
Name: JEAN PHILIPPE, MONTES  
Address: 2455 RED OAK RD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP ( ) Delete  
Name: ALERTE, ROBERT  
Address: 1805 GRANDE POINTE BLVD APT 3107  
City-St-Zip: ORLANDO, FL 32839

Title: TR ( ) Delete  
Name: PHENIX, PAUL  
Address: 4257 17TH AVE SW  
City-St-Zip: NAPLES, FL 34116

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HERNS MONROSE

SEC

09/01/2008

Electronic Signature of Signing Officer or Director

Date