FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075121 (2)

PMDM HOLDING, INC.

Principal Place of Business

Mailing Address

18581 NW 27TH AVE

18581 NW 27TH AVE

FILED Mar 11 1997 8:00am Secretary of State



Suite, Apt #, etc. Suite, Apt #, etc. City & State City & State City & State City & State Country Country Suite, Apt #, etc. 5, Certificate of Status Desired Fee Required Fee Required \$5.00 May Be Added to Fees Added to Fees Country Country Country Suite, Apt #, etc. Fee Required Fee Required State City & State Country Country State Added to Fees Trust Fund Contribution Added to Fees Added to Fees	MIAMI FL 33058	3	MIAMI FL 33056-3104			İ				
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Country Section Sect			} 1				5, Certificate of Status Desired			
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POWELL, CHARMANNE C Se NV 193RD ST, S-138 MIAMI FL 33169 10		- Country		Coun	1ry		8. This corporation has liability for in	ntapgible	tax under	s. 199.032,
POWELL CHARMANE C 99 NW 183RD ST, 5-138 MIAMI FL 33169 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code	24 53	05 6 25	29	30						
## 1. Fursiant to the provisions of Sections 607 D502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, is the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I all mallets with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I all mallets with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I all mallets with, and accept the obligations of Section 607 0505, Florida Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I all mallets with, and accept the obligations of Section 607 0505, Florida Statutes. Black the obligation of Section 607 0505, Florida Statutes are all the section of Sections of Sections 607 0505, Florida Statutes are all the sections of Sections of Sections 607 0505, Florida Statutes. The section of Sections of Sections 607 0505, Florida Statutes are all the sections of Se		g. Name and Address of Curren	t Registered Agent				10. Name and Address of New Reg	pistered /	igent	
Section Sect	POW	/ELL. CHARMAINE C		-	B1 1	Name				
NAME 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00				-	12	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
11. Fursional to the provisions of Sections 607 0502 and 607 1508. Florida Statute, the above-named corporation submits this statement for the purpose of charging its registered agent, or both, in the State of Frontal South change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 5505, Florida Statute, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 5505, Florida Statutes. 12			4		~ `	30.001.1100.				
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1. Passame to the pressure of Sections 607 0509 and 607 1509. Florids Statutes, the above-named corporation submits this statement for the purpose of changing the registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florids Statutes. SIGNAT Use				- 1'	54 (Jity		FL	85 24	3 Code
No.	office or o	egistered agent, or both, in the State.	of Florida, Such change was au	uhorized	by th	ne corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of it the app	changing ointment a	its registered is registered
THE	SIGNATURE	Stollarum i typed or proced nour of registered ago	nt and title if aupticable (NOTE:	- Flogistered	Agent :	signature requi				
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information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytinie Phone #