

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000086381 (9)

1. Corporation Name

MMP ASSOCIATES, INC.



Principal Place of Business

Mailing Address

4152 SW 74TH CT.
MIAMI FL 33155

4152 SW 74TH CT.
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/13/1993

2. Principal Place of Business

2a. Mailing Address

21 11318 SW 85 LANE

26 PO Box 830906

4. FEI Number

65-0456811

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PIEDRA, MARIA O
8501 SW 82 AVE
MIAMI FL 33143

81 Name

MARIA O. PIEDRA

82 Street Address (P.O. Box Number is Not Acceptable)

11318 SW 85 LANE

83

84 City

Miami

FL

85 Zip Code

33173

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent Signature required when reinstalling)

DATE

MARIA O. PIEDRA

3/9/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME PIEDRA, MARIA O
STREET ADDRESS 8501 SW 82 AVE
CITY- ST- ZIP MIAMI FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 11318 SW 85 LANE
1.4 CITY- ST- ZIP MIAMI FL 33173

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

☐ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARIA O. PIEDRA

3/9/98

305 412-9529

CR2E034 (10/97)