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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P96000007354 (9)

M&M EXPORT, INC.

Principal Place of Business	

FILED May 07 1998 8:00am Secretary of State

rinciparriac	e of Bushiess	Mailing Address				
905 NORTH		P O BOX 540				
LAKE WORTH	1 FL 33460	LAKE WORTH FL 33460			DO NOT WRITE IN THIS SPACE	
		US				
					3. Date Incorporated or Qualified	
9 Dissipal D	do a of Ducinian	1 a. Martin Addison			01/23/1996	
	So. 6 Street	2a. Mailing Address			1 h	lied For
		26				Applicable
Sulte, Apt.	#, 6(C.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Ac	
22	2	27			Fee Req	uired
City & State	LE WORTH	City & State			6. Election Campaign Financing \$5.00 N	
		28			Trust Fund Contribution	Fees
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the current year Intar	٠ ,
24 334	60 25]	29 30	<u>ol</u>		Personal Property Tax due June 30. L Yes L	No
ļ <u>.</u>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
l sc	H OLI N, CHRISTIAN N		81	Name		
224	4 DATURA STREET STE 1100		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
l WE	EST PALM BEACH FL 33401				(
			83			
			-	0.4		
	,		84	City	FL 85 Zip Co	ode
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes.	the above	s-named c		registered
office or r	egistered agent, or both, in the State of media. With, and accept the object.	I Florida Such change was aut	horized by	the corpo	orporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as re	gistered
Ι.	in ladition will, and accept the contract	07.0505, Floric	ia Statutes	j.		ļ
SIGNATURE	Signature, types or printed name of registered agent	and tills d an dicable (NCO) C. D.	Inmetered Age	nd signature se	equired when reinstating) DATE	
12,	OFFICERS AND		13.	i i signaturo re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	D	DELETE	1.1 TITLE		Change	Addition
NAME	MATTILA, REIJO		1.2 NAME			
STREET ADDRESS	905 NORTH J STREET		1.3 STREET	40000000	unt so astrect	19
	LAKE WORTH FL 33460			ADDRESS	MATTILA RELIO 1105 SO GSTVERT LAKE WORTH FL 33460	
CITY-ST-ZIP TITLE	DAKE WORTH PE 33400	☐ DELETE	1.4 CITY-S 2.1 TITLE	1-ZIP (Addition
			-		□ Cristings	L. Addition
NAME			2.2 NAME			
STREET ADDRESS			23 STREET			
CITY-ST-ZIP		DOLETE	2 4 CITY-S	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. C(TY - 5	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	T-21P		
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME	ļ		1
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S			
TITLE	7/4	DELETE	6.1 TITLE	. EH	☐ Change	Addition
NAME	i.		6.2 NAME		ondings	
STREET ADDRESS			ł	ADDRESS		
1			6.3 STREET	1		
CITY-ST-ZIP			6.4 CITY - S	T - ZIP		

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 or an attachment with an address.