

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**APPROVED
AND
FILED**

1997 OCT 20 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000013243 (6)
1. Corporation Name
M & M COUNTERTOPS, INC.



Principal Place of Business 645 JAMES LEE ROAD, #232 FT. WALTON BEACH FL 32547	Mailing Address 645 JAMES LEE ROAD, #232 FT. WALTON BEACH FL 32547
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 99 Lovejoy Road		2a. Mailing Address 32 Cascabellas ST		3. Date Incorporated or Qualified 02/08/1996	3a. Date of Last Report
21 Suite, Apt. #, etc. 340	22 City & State Fort Walton Beach, FL	26 Suite, Apt. #, etc.	27 City & State Mary Esther FL	4. FEI Number 59-3863396	Applied For <input type="checkbox"/> Not Applicable
23 Zip 32549	24 Country USA	29 Zip 32569	30 Country USA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent MORAS, KEVIN 645 JAMES LEE ROAD, #232 FT. WALTON BEACH FL 32547				10. Name and Address of New Registered Agent Dawn Moras 32 Cascabellas ST Mary Esther FL 32569	

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 *Dawn M. Moras* DATE **9-16-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE MORAS, KEVIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORAS, KEVIN		1.2 NAME	
STREET ADDRESS 645 JAMES LEE ROAD, #232		1.3 STREET ADDRESS 9301 East River Road	
CITY-ST-ZIP FT. WALTON BEACH FL 32547		1.4 CITY-ST-ZIP Navarre, FL 32566	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE MORAS, DAWN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORAS, DAWN		2.2 NAME	
STREET ADDRESS 645 JAMES LEE ROAD, #232		2.3 STREET ADDRESS 32 Cascabellas St.	
CITY-ST-ZIP FT. WALTON BEACH FL 32547		2.4 CITY-ST-ZIP Mary Esther, FL 32569	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE MORAS, STEPHEN W	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORAS, STEPHEN W		3.2 NAME	
STREET ADDRESS 32 CASCABELLAS ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP MARY ESTHER FL 32569		3.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE MORAS, JANICE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORAS, JANICE		4.2 NAME	
STREET ADDRESS 32 CASCABELLAS ST.		4.3 STREET ADDRESS 9301 East River Road	
CITY-ST-ZIP MARY ESTHER FL 32569		4.4 CITY-ST-ZIP Navarre, FL 32566	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE 600002327446	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME -10/22/97-01108-027	
STREET ADDRESS		5.3 STREET ADDRESS ***550.00 ***550.00	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *Dawn M. Moras* **Dawn M. Moras** **10-16-97** **950-581-1959**

CR2E034 (4/97)