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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000024104 (7)

MULTIMEDIA MEDICS 4M, INC.

Principal Piaco 14601 N. SPUF MIAMI FL 3316	DRIVE	Mailing Address 14601 N. SPUR DRIVE MIAMI FL 33161-2036				
					3. Date Incorporated or Qualified 3. 03/13/1996	Date of Last Report
2. Principa P 21	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0725 7/6	Applied For Not Applicable
Suite, Apt	#, etc	Suite. Apt. #, etc.	rep		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(p 24	Country [25]	Zip 29	Country 30		8. This corporation has fiability for intangible tax under s. 199.032, Florida Statutes Yes No	
	9. Name and Address of Curre	it Registered Agent		-T-::	10. Name and Address of New Registe	red Agent
POWERS, JEROME 2572 GARDEN COURT COOPER CITY FL			8	2 Street Add	tress (P.O. Box Number is Not Acceptable)	,
			8	4 City		FL 85 Zip Code 33/6/
11. Pursuant l office or r agent La	to the provisions of Sections 607.050 egistered agent, or both in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statul of Florida. Such change was lations of, Section 607.0505, Fl	tes, the abo authorized I orida Statut	ve-named cor	poration submits this statement for the purpo- ation's board of directors. I hereby accept the	
SIGNATURE	Soil the transfer or province of the college date	rate and little of additionable (NO)	F Begistered A	nent sinnature regu	uired when reinstaling) 2 - D.	13-97
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
1111.8	PD	DELETE	1.1 TITLE	• · · · · · · · · · · · · · · · · · · ·		Change Addition
tiAn ^a e	PETYNIA, THOMAS		1.2 NAM			
STREET ADDRESS	14601 N. SPUR DRIVE		1.3 STRE	ET ADDRESS		
CITY - ST - ZiP	MIAMI FL 33161		1.4 CITY	-ST-ZIP		
Til.F	VD	DELETE	2.1 TiTLE			Change Addition
NAME	PETYNIA, DOROTHY		2.2 NAM			
STREET ADDRESS	14601 N. SPUR DRIVE		2 3 S1RE	ET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33161		2. 4 CITY	- \$T - 2(P		
1010	TSD	DELETE 3.1				Change Addition
NAMI	PETYNIA, EYMARD		3.2 NAMI			
STREET ADDRESS	14601 N. SPUR DRIVE		3.3 STRE	ET ADDRESS		
City - S1 - ZiP	MIAMI FL 33161		3.4 CITY	- ST- ZIP		
TULF		OELETE	4.1 TOTAL			Change Addition
NAMé			4. 2 NAM	E		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY - ST - ZIP			4.4 CITY	-ST-ZIP		
1000	☐ OELETE		5.1 TITLE			Change Addition
NAME			5.2 NAMI			
STREET ADDRESS			5.3 STRE	et address		
CHTV - \$1 - Z00			5.4 CITY	-ST-ZIP		
DICF		OELETE	6 1 TITLE			Change Addition
NAME			6.2 NAMI			
STREET AODRESS			6.3 STRE	ET ADDRESS		

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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

6.4 CITY - ST - ZIP