SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT SEE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham 🤫

Secretary of State

DIVISION OF CORPORATIONS

P97000013177 (5)

AA & MM ENTERPRISE, INC.

Principal Place of Business	Mailing Address
3408 S.W. 67TH LANE	3408 S.W. 67TH LANE
MIRAMAR FL 33023	MIRAMAR FL 33023

APPROVED AND

98 NOV 12 PM 4: 54

SECRETARY OF STATE FALLAHASSEE, FLORIDA



								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
								02/06/1997		
2. Principal Pl	lace of Rusine		2a.	Mailing Addres	22	-		4. FEI Number Applied For		
<u> </u>	lacc of Basino	J J	26	((Carring) (Carring				65-0730809 Not Applicable		
21	4 -4-		26	Suite, Apt. #, 6	nto.			\$8.75 Additional		
Suite, Apt. #, etc.				27				5. Certificate of Status Desired Fee Required		
				City & State						
City & State	е			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23			28	7:-		Countr				
Zîp	ļ	Country	<u> </u>	Zip	-	- '	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	2	71	29] 3	io		Talebond Topolity (talebond talebond ta		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 201 Address of New Registered Agent 81 Name										
PALA	ICIO, AQUILI	ES				°'	Name			
3408	S.W. 67TH	LANE				82 Street Address (P.O. Box Number is Not Acceptable)				
MIRA	MAR FL 330	23						`		
						83				
						 	014	85 Zlp Code		
						84	City	FL 85 Zip Code		
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.										
	atti iaitiilai wiu	i, and accept the oblig	auons or	, 36011011 007.0	000, 1 1011	ua Olalaio	~.			
SIGNATURE.	Stonature, typed or	printed name of registered age	nt and title it	f applicable.	INOTE	: Realstered	Apent signatur	re required when reinstating) DATE		
12.		OFFICERS AN				13.	• • •	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D			DEL	FTE	1,1 TITLE		Change Addition		
NAME	PALACIO, A	OTHES		L Dul		1.2 NAME		1000026909118		
! !	3408 S.W.						ADORESS	-11/18/9801081008		
STREET ADDRESS										
CITY-ST-ZIP	MIRAMAR F	L 33023				1.4 CITY-S	T-ZIP	****SSO_OO *****SSO_OO		
TITLE				L DEL	ETE	2.1 TITLE		L. Change L. Addition		
NAME						2.2 NAME				
STREET ADDRESS						2.3 STREE	FADDRESS	ĺ		
CITY-ST-ZIP						2.4-CITY-S	I-ZIP			
TITLE				DEL	ETE	3.1 TITLE		☐ Change ☐ Addition		
NAME						3.2 NAME				
STREET ADDRESS						3.3 STREE	ADDRESS			
CITY-ST-ZIP						3.4 CITY-S	r-zip			
TITLE				DEL	ETE	4.1 TITLE		Change Addition		
l į				i ber	<u></u>	4.2 NAME				
NAME						1				
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP						4,4 CITY-S	T-ZIP			
TIRLE				L DEL	ETE	5.1 TITLE	į	L. Change L. Addition		
NAME						5,2 NAME	- [
STREET ADDRESS						5.3 STREE	ADDRESS			
CITY-ST-ZIP						5.4 CITY-S	T-ZIP			
TITLE				DEL	ETE	6.1 TITLE		Change Addition		
NAME					. –	6.2 NAME		$\mathcal{M} \cap \mathcal{M} = \mathcal{A} = \mathcal{A}$		
STREET ADDRESS						6.3 STREE	ADDRESS	\$72. 1 -		
CITY-ST-7ID						6.4 CITY-S		•		

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 chapted, or on an attachment with an address.

SIGNATURE: