

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P97000023367

1. Corporation Name

M.M. HOLDINGS, INC.

Principal Place of Business

6100 W. Colonial Drive
Orlando, FL 32808

Mailing Address

6100 W. Colonial Drive
Orlando, FL 32808

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

2123 Willow Lauren Lane
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

c/o James G. Balletta, Esq.
Suite, Apt. #, etc.
215 North Eola Drive

City & State

Windermere, FL 34786

Zip 34786

Country

USA

City & State

Orlando, FL 32802

Zip 32802

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/14/97

5. FEI Number

59-3444578

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P/S/T	Steven Gupta	2123 Willow Lauren Lane	Windermere, FL 34786

REINSTATEMENT

98-12/4/98

700002706537-7
-12/09/98-01003-049
****750.00 ****750.00

8. Name and Address of Current Registered Agent

James G. Balletta, Esquire
215 N. Eola Drive
Orlando, FL 32801

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

James G. Balletta

Date 12/3/98

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

M.M. HOLDINGS, INC.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

Steven Gupta, Director

Date

12/1/98

Daytime Phone #

(407) 399-2500

CR2E040 (12/98)