

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

FILED
Jun 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000031066 (8)

1. Corporation Name
DMMB, INC.



Principal Place of Business

C/O BEVERLY P. MYRBERG, ESO.
2100 CORAL WAY - SUITE 500
MIAMI FL 33145

Mailing Address

C/O BEVERLY P. MYRBERG, ESO.
2100 CORAL WAY - SUITE 500
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/07/1997

4. FE Number

65-0591009

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 80 S.W. 8th Street

Suite, Apt. #, etc.

22 Suite 2804

City & State

23 Miami, Florida

Zip

24 33130

Country

25 Dade

2a. Mailing Address

26 80 S.W. 8th Street

Suite, Apt. #, etc.

27 Suite 2804

City & State

28 Miami, Florida

Zip

29 33130

Country

30 Dade

9. Name and Address of Current Registered Agent

MYRBERG, BEVERLY P ESO
2100 CORAL WAY - SUITE 500
MIAMI FL 33145

81 Name

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

83

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

DIANE MOURIN

Diane Mourin

8/15/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PVST
STREET ADDRESS MOURIN, DIANE
CITY-ST-ZIP 3270 S.W. 7TH STREET
MIAMI FL 33135

TITLE ☐ DELETE

NAME D
STREET ADDRESS MOURIN, DIANE
CITY-ST-ZIP 3270 S.W. 7TH STREET
MIAMI FL 33135

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 in an attachment with an address.

SIGNATURE

Diane Mourin, Pres

8/15/98 205-556626

CR2E034 (10/97)