Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

3. Date Iricorporated or Qualifed 05/29/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-35/17811 Suite, Apt. #, etc. 5. Certifc ate of Status Desired 5. Certifc ate of Status Desired 5. Certifc ate of Status Desired 7. City & State 6. Election Campaign Financing 7. Trust Fund Contribution 7. Trust Fund Contribution 7. Country 7. Sip 7. Country 8. This corporation owes the current year 7. Person all Property Tax. 7. Person all Property Tax. 7. Name and Address of New Register 8. Name 8.					UUU47 165	Corporation Name MM ENTERPRISES, INC.	1. Con	
TALLAHASSEE FL 32303 TALLAHASSEE FL 32303 DO NOT WRITE IN 3. Date Incorporated or Qualifed 05/29/1997 2. Principal Place of Business 2a. Mailing Address 25	Bill Bigil (20)	- I \$014\$\$1 tio rotti jasti poiti patit sarti sarti		,	Mailing Address	cipal Place of Business	Principa	
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 3. FEI Number 59-35:17811 Suite, Apt. #, etc. 5. Certifcate of Status Desired City & State City & State City & State 28 Zip Country Zip Country Zip Country 30 Name and Address of Current Registered Agent Divided The Fund Contribution Registered Agent Name Name A FEI Number 59-35:17811 Selection Campaign Financing Trust Fund Contribution Registered Agent 10. Name and Address of New Registered Name	⊢IS SPAC	DO NOT WRITE IN THIS						
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Suite, Apt. #, etc. 22 City & State City & State Zip Country Name and Address of New Register Registered Agent Name					— <u> </u>	Principal Place of Business	_	
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Zip Country Zip Country 8. This corporation owes the current year 24 25 29 30 Person al Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Register 8. This corporation owes the current year Person al Property Tax. 10. Name and Address of New Register 8. This corporation owes the current year Person al Property Tax.	\$5 Ac		├─ ┐ `			⊢ , '		
B1 Name	r ntangible	This corporation owes the current year into Person al Property Tax.			⊢ .	·	·	
	ed Agent	10. Name and Address of New Registered		194	urrent Registered Agent	9. Name and Address of Curr		
MARKLET, JUTCE 3C96 S FULMER CIRCLE TALLAHASSEE FL 32303 82 Street Acdress (P.O. Box Number is Not Acceptable)		ess (P.O. Box Number is Not Acceptable)		82		••••		

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90031 039 ***150.00



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TALL	AHASSEE FL 32303		83						
			84	City			FL	85 Zip	Code
		100 FI : 1 OU				this statement for t		shonging i	te ragistored
office or r	to the provisions of Sections 607.0502 a egistered agent, or bo.h, in the State of F rn familiar with, and accept the obligation	lorida. Such change was au	ithorized by	the corpor	erporation submits ration's board of cir	rectors. I hereby ac	cept the appoin	tment as	eg:stered
SIGNATUFE							DATE		
	Signature, typed or printed na ne of registered agent and OFFICERS AND D		13.	it signature re	quired when reinstating)	NS/CHANGES TO		D DIRECT	OFS IN 12
12.		DELETE	11 TITLE			10/0/1/1020 10	OI TIOENO 741	Change	
TITLE	P HARMEY JOYOF	☐ DELETE							
NAME	MARKLEY, JOYCE		1.2 NAME						
STREET ADDRE 3S	3096 S FULMER CIRCLE		1.3 STREET	ADDRESS					'
CITY-ST-ZIP	TALLAHASSEE FL 32303		1.4 CITY-S	T-ZIP					Addition
TITLE	V .	☐ DELETE	2.1 TITLE					Change	Addition
NAME	MARKLEY, WHITNEY		2.2 NAME	-					
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			6.4 CITY-S						
CITY-ST-ZIP	certify that the information supplied with the	is films does not qualify for			in Section 119.07	3)(i) Florida Statute	e I further car	ify that the	information

I nereby ceruity 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 informati 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 1 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, with a Lother like empowered.

SIGNATURE:

Resident 4/21/99