

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90095 012 ***158.75

DOCUMENT # P99000005716
1. Entity Name
M+M GRAPHICS + DESIGN INC

Principal Place of Business **Mailing Address**
4400 W. HILLSBORO BLVD
COCONUT CREEK FL 33073

2. Principal Place of Business **3. Mailing Address**
4400 W. HILLSBORO BLVD 4400 W. HILLSBORO BLVD
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
COCONUT CREEK COCONUT CREEK, FL
Zip **Country** **Zip** **Country**
33073 33073

4. FEI Number **Applied For**
65-0890115 ☐ Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
☒

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
ROBERT MERICLE
2261 NW 161 TERR
PEMBROKE PINES, FL 33028

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **Signature, typed or printed name of registered agent and if applicable** **(NOTE: Registered Agent signature required when reinstating)** **DATE**

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$350.00** **10. Election Campaign Financing**
(See criteria on back) **After September 12, 2001 Fee will be \$750.00** **Trust Fund Contribution.** **\$5.00 May Be Added to Fees**
☐ **Make Check Payable to Department of State** ☐

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
PRES	ROBERT MERICLE		NAME		
STREET ADDRESS	2261 NW 161 TERR		STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES, FL 33028		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
DIR	MICHAEL NEIL MERICLE		NAME		
STREET ADDRESS	154 IRON KING ROAD		STREET ADDRESS		
CITY-ST-ZIP	DURANGO, CO. 81301		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
DIR	GREGORY K. TAWES		NAME		
STREET ADDRESS	154 IRON KING ROAD		STREET ADDRESS		
CITY-ST-ZIP	DURANGO, CO. 81301		CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Robert Mericle 4/24/02 95427-0622