

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000067577

1. Entity Name
M AND M PRODUCTIONS, INC.

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90269 014 ***150.00

Principal Place of Business

12250 NW 12TH ST
PLANTATION FL 33323

Mailing Address

12250 NW 12TH ST
PLANTATION FL 33323

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0969962

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SALVER, PAUL
5881 N.W. 151ST STREET
STE 101
MIAMI LAKES FL 33014

Name MARK DREYER

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

12250 NW 12 ST

City PLANTATION

FL

Zip Code 33323

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 title 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. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME DREYER, MARK
STREET ADDRESS 12250 NW 12TH ST
CITY-ST-ZIP PLANTATION FL 33323

TITLE PRESIDENT ☒ Change ☐ Addition
NAME DREYER MARK
STREET ADDRESS 12250 NW 12 ST
CITY-ST-ZIP PLANTATION FL 33323

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VICE-PRESIDENT ☐ Change ☒ Addition
NAME DOBIS DREYER
STREET ADDRESS 12250 NW 12 ST
CITY-ST-ZIP PLANTATION FL 33323

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MICHELLE DREYER ☐ Change ☐ Addition
NAME Secretary
STREET ADDRESS 12250 NW 12 ST
CITY-ST-ZIP PLANTATION FL 33323

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-10-01

CR2E034 (10/00)