

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V67796 (5)

1. Corporation Name

M & M LABOR AND CONSTRUCTION MAINTENANCE, INC.



Principal Place of Business

Mailing Address

5544 PEMBROKE RD.
PERSONAL BUILDING
HOLLYWOOD FL 33021
US

4711 S.W. 19TH ST.
W. HOLLYWOOD FL 33023

3. Date Incorporated or Qualified 09/28/1992	3a. Date of Last Report 08/24/1995
4. FET Number 65-0368655	Applied for Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

MOSS, WILLIAM A.
4711 SW 19TH ST
W HOLLYWOOD FL 33024

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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: *Marion E. Moss* Vice President

July 18, 1996

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	MOSS, WILLIAM A.	1.2 NAME	
STREET ADDRESS	4711 SW 19TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	W HOLLYWOOD FL	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	
NAME	MOSS, MARIAN E.	2.2 NAME	
STREET ADDRESS	4711 SW 19TH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	W HOLLYWOOD FL	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	
NAME	MOSS, WILLIAM A., JR.	3.2 NAME	
STREET ADDRESS	4711 SW 19TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	W HOLLYWOOD FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Marion E. Moss*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 18, 1996 - 961-9246

CR2E034 (3/96)