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Mar 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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  
**5544 PEMBROKE RD.  
PERSONAL BUILDING  
HOLLYWOOD FL 33021  
US**

Mailing Address  
**4711 S.W. 19TH ST.  
W. HOLLYWOOD FL 33023-3315**



2. Principal Place of Business  
21 **5544 Pembroke Rd.**  
Suite, Apt. #, etc.  
22  
City & State  
23 **W. Hlwd FL - USA**  
Zip Country  
24 **33023** 25 **USA**

2a. Mailing Address  
26 **5250 S.W. 21<sup>st</sup> St**  
Suite, Apt. #, etc.  
27  
City & State  
28 **W. Hlwd FL**  
Zip Country  
29 **33023** 30 **USA**

3. Date Incorporated or Qualified **09/28/1992** 3a. Date of Last Report **08/08/1996**  
4. FEI Number **65-0368655** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

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  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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3-6-97

14. I do 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 on an attachment with an address.

SIGNATURE: *Marian E. Moss* - Marian E. Moss - V. President - 2-24-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)