

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000064463

Entity Name: MMK REPORTERS, INC.

Current Principal Place of Business:

2298 SW JAY AVENUE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

2298 SW JAY AVENUE
PORT SAINT LUCIE, FL 34953 US

FEI Number: 65-0853199

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FACONTI, MICHELE
2298 SW JAY AVENUE
PORT ST. LUCIE, FL 34953 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name FACONTI, MICHELE
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

Title PD
Name FACONTI, VICTOR PETER
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

Title PD
Name FACONTI, VICTORIA
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

Title PD
Name FACONTI, MICHELE
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

Title PD
Name FACONTI, MICHELE
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

Title PD
Name FACONTI, MICHELE
Address 2298 SW JAY AVENUE
City-State-Zip: PORT ST. LUCIE FL 34953

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: FACONTI, MICHELE

PRESIDENT

04/07/2016

Electronic Signature of Signing Officer/Director Detail

Date