2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006092

Entity Name: MMR CONSTRUCTORS, INC.

FILED May 11, 2007 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
15961 AIRLINE HWY. BATON ROUGE, LA 70817			15961 AIRLINE HWY. ATTN: SHARON ODOM BATON ROUGE, LA 70817			
Current Mailing Address:			New Mailing Address:			
P.O. BOX 84210 BATON ROUGE, LA 708844210			P.O. BOX 84210 ATTN: SHARON ODOM BATON ROUGE, LA 708844210			
FEI Number: 72-1046000 FEI Number Applied For ()		FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
1200 SOU PLANTATI The above	PORATION SY TH PINE ISLA ION, FL 33324 named entity of Florida.	ND ROAD I US	ourpose of changing it	s registered	office or registered agent, or both,	
SIGNATU	RE:					
		nic Signature of Registered Ag	ent	Date		
		3(2)(b), F.S., the corporation did no	ot receive the prior notice	э.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PCD (RUTLAND, JAN 15961 AIRLINE BATON ROUGE	HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (WELBORN, TH 15961 AIRLINE BATON ROUGE	HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST (COURVILLE, J 15961 AIRLINE BATON ROUGE	HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CLOUATRE, G 15961 AIRLINE BATON ROUGE	HIGHWAY	Title: Name: Address: City-St-Zip:	D (X WELBORN, TI 15961 AIRLIN BATON ROUG	E HIGHWAY	
Title: Name: Address: City-St-Zip:	D (BOUDREAUX, 15961 AIRLINE BATON ROUGE	HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES B. RUTLAND PCD 05/11/2007