2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L78580

Entity Name: MIN & MIN, INC.

HULTS, KELLY

3860 NW 59 AVE

MIAMI, FL 33166

Name: Address:

City-St-Zip:

FILED Mar 06, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7255 NW 31ST LANE 8550 NW 56 ST MIAMI, FL 33122 US				7282 NW 33RD STREET MIAMI, FL 33122 US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
7255 NW 3 8550 NW 5 MIAMI, FL	66 ST		7282 NW 33RD STRE MIAMI, FL 33122 U		
FEI Number:	65-0228484	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
HULTS, KE 3860 NW 5 MIAMI, FL	9 AVE				
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () HULTS, YEN M 3860 N W 59 A MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () HULTS, RUSSE 3860 NW 59 AV MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () GENTILE, KATH 3860 NW 59 AV MIAMI, FL 331	/ENUE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title:	S ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KELLY HULTS S 03/06/2005