


**2006 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

**DOCUMENT # P95000073356**  
 1. Entity Name  
 MDM, INC.



Principal Place of Business      Mailing Address  
 716 21ST STREET                      716 21ST STREET  
 VERO BEACH, FL 32960                VERO BEACH, FL 32960



04282006      No Chg-P      CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 65-0610402      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent  
 GLENN, GEORGE A  
 7555 20TH STREET  
 VERO BEACH, FL 32960

**DO NOT WRITE  
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**      9. Election Campaign Financing      **\$5.00** May Be  
 After May 1, 2006 Fee will be **\$550.00**      Trust Fund Contribution.            Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BARHAM, MICHAEL
STREET ADDRESS	716 21ST STREET
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	D
NAME	DELUCA, DANIEL
STREET ADDRESS	716 21ST STREET
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000557186  
 05/17/06-80040-005 150.00

**DO NOT WRITE  
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel DeLuca      4/29/06      772-778-8114  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Digits of Phone