2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jan 24, 2005 08:00 AM Secretary of State

DOCUMENT # P96000041979 1. Entity Name M & M REAL ESTATE INVESTORS, INC.						ocicia	1 y 01 5 ta
Principal Plac 2441 SW 37 MIAMI, FL 3	TH AVENUE 2	ailing Address 2441 SW 37TH AVENUE AIAMI, FL 33145		* 1881:587 ((8	 F (W)(m W)(1) MW)(7 MM)(7 MM)		
			*				
DO NOT WRITE IN THIS SPACE				01112005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For			
				4. FEI Number Applied For 65-0676980 Not Applicable 5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name and Address of Current Regis	tered Agent			, 	ree m	equirea
308 ALHA	A, MANNY CPA MBRA CIRCLE ABLES, FL 33134	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 Signature, typed printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				00 May Be ed to Fees			
IO.	ÖFFICERS AND DIREC	TORS	1				
NAME STREET ADDRESS CITY+ST-ZIP	AIRALA, MANUEL A MD 2441 SW 37TH AVENUE				//000 	00192489 5-80 018 -0	120 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STV AIRALA, MARTA S 2441 SW 37TH AVENUE MIAMI, FL					<u>.</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY - ST - ZIP							
12. I hereby certify that the information supplied with this filling does not qualify 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 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.							

MANUEL

AJEALA

1-19:05

Date

395.442.0066

Daytime Phone #