above, or on an attachment with all other like empowered. SIGNATURE: PAMELA M KALIL

Electronic Signature of Signing Officer/Director Detail

LAKE WORTH, FL 33467 US

Electronic Signature of Registered Agent

KALIL, PAMELA M 5407 FEARNLEY RD.

5407 FEARNLEY RD

City-State-Zip: LAKE WORTH FL 33467

SIGNATURE:

Address

**Officer/Director Detail :** PRES Title Title VP KALIL, PAMELA M Name

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.

# DOCUMENT# P99000104982

### Entity Name: MERCHANDISING & MANUFACTURING ASSOCIATES, INC.

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

5407 FEARNLEY ROAD LAKE WORTH. FL 33467

#### **Current Mailing Address:**

5407 FEARNLEY RD. LAKE WORTH. FL 33467

#### FEI Number: 23-1324864

## Name and Address of Current Registered Agent:

Name KALIL, JOSEPH D Address 5407 FEARNLEY ROAD City-State-Zip: LAKE WORTH FL 33467

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

PRESIDENT

01/12/2014

Date

FILED Jan 12, 2014 Secretary of State CC3219580374

Certificate of Status Desired: Yes

Date