FILED Apr 23, 2003 8:00 am Secretary of State

2003	FOR	PROFIT	CORPORAT	TION
UNIFO	RM E	SUSINESS	S REPORT	(UBR)

DOCUMENT # 414907



Entity Name M & M ENTER	RPRISES OF DAYTON	A, INC.	04-23-2003 90250 037 ***150.00					
Principal Place of Business 1502 STATE AVENUE HOLLY HILL FL 32117		Mailing Address 1502 STATE AVENUE HOLLY HILL FL 32117			1911 BiBl) BiBl) BiBl) B iBl) (22)			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
					CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59-1439129	Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
BUTTERFIELD, JOHN E. 501 PEACOCK ROAD HOLLY HILL FL 32017			Name Street Addres	s (P.O. Box Number is Not Acceptable)				
TOLET FILE TE GEOTAGE			City	FL	Zip Code			
SIGNATURE Signature FILE N After May	registered agent e, typed of prints came of registered agent OW!!!	and title if applicable. (NOT	E: Registered Agent signature requ	tered agent, or both, in the State of Florida. I am triad when reinstating) DATE 9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11			
STREET ADDRESS 501	terfield, John E. Peacock Rd. Ly Hill Fl	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition			
STREET ADDRESS 501	TERFIELD, MARY Y. PEACOCK RD. LY HILL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS 501	FERFIELD, MARY, Y PEACOCK RD LY HILL-FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	hat the information curalled with	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further cer	Change Addition			

indicated on this report or supplemental report is true and accurate and that my signature shalf 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 within address, with all other like empowered. SIGNATURE: AST PROTECTION BUTTERFIELD 4/18/03 386-672-1554