

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F02000006246	
1. Entity Name M & J INVESTMENTS OF MINNESOTA, INC.	



FILED
05 AUG -8 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 4257 HAINES ROAD SUITE A DULUTH, MN 55811	Mailing Address 4257 HAINES ROAD SUITE A DULUTH, MN 55811
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

08022005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent HAYMAN, RICHARD L 19415 SILVER OAK DRIVE FORT MYERS, FL 33912	
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7. Name and Address of New Registered Agent	
Name	Goldberg, David A.
Street Address (P.O. Box Number is Not Acceptable)	5405 SW 25th Place
City	Cape Coral FL Zip Code 33914

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	David A. Goldberg, Registered Agent 8/5/2005

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	CST
NAME	GOLDBERG, DAVID ALLEN <input type="checkbox"/> Delete
STREET ADDRESS	4257 HAINES ROAD, SUITE A
CITY-ST-ZIP	DULUTH, MN 55811
TITLE	VCVP
NAME	GOLDBERG, CHERYL B <input type="checkbox"/> Delete
STREET ADDRESS	4257 HAINES ROAD, SUITE A
CITY-ST-ZIP	DULUTH, MN 55811
TITLE	D
NAME	GOLDBERG, DAVID DEAN <input type="checkbox"/> Delete
STREET ADDRESS	4711 BAYCLIFFE DRIVE
CITY-ST-ZIP	EXXCELSIOR, MN 55331
TITLE	D
NAME	OGREN, MARK JOSEPH <input type="checkbox"/> Delete
STREET ADDRESS	6076 SCENIC ROAD
CITY-ST-ZIP	MINNETONKA, MN 55345
TITLE	D
NAME	GOLDBERG, DARRELL GENE <input type="checkbox"/> Delete
STREET ADDRESS	4978 MILLER TRUNK HWY.
CITY-ST-ZIP	DULUTH, MN 55811
TITLE	D
NAME	OGREN, LORI LYNN <input type="checkbox"/> Delete
STREET ADDRESS	3400 AVE. OF THE ARTS #G214
CITY-ST-ZIP	COSTA MESA, CA 92626

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	400058541674
CITY-ST-ZIP	08/15/05--01002--019 **\$61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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.	
SIGNATURE: <i>David A. Goldberg</i>	David A. Goldberg, Sec./Treas. 8/5/2005

218-729-9445

Date Daytime Phone #