2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006246

Entity Name: M & J INVESTMENTS OF MINNESOTA, INC.

FILED Jan 10, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|--|-------------------------------|---|--|--|
| 4257 HAINES ROAD | | | | | |
| SUITE A DULUTH, MN 55811 | | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 4257 HAINES ROAD SUITE A DULUTH, MN 55811 | | | | | |
| , | | | FEI Number Not Applicable () | Certificate of Status Desired () | |
| ., | | | | | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| GOLDBERG, DAVID A 5405 SW 25TH PLACE CAPE CORAL, FL 33914 US | | | | | |
| 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. | | | | | |
| SIGNATURE: | | | | | |
| | Electronic | Signature of Registered Agent | • | Date | |
| Election Campaign Financing Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | CST () E GOLDBERG, DAV 4257 HAINES RO DULUTH, MN 558 | AD, SUITE A | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VCVP () C GOLDBERG, CHI 4257 HAINES RO DULUTH, MN 558 | AD, SUITE A | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E GOLDBERG, DAV 4711 BAYCLIFFE EXXCELSIOR, M | DRIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () C OGREN, MARK J 6076 SCENIC RO MINNETONKA, M |)AD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () C GOLDBERG, DAR 4978 MILLER TR DULUTH, MN 558 | UNK HWY. | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () E OGREN, LORI LY 3400 AVE. OF TH COSTA MESA, CA | IE ARTS #G214 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 | | | | | |

SIGNATURE: CHERYL B GOLDBERG VICE 01/10/2006

above, or on an attachment with an address, with all other like empowered.