

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 09, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # F16831**

1. Entity Name  
**M & M TITLE SERVICES, INC.**



Principal Place of Business  
**16800 NE 2 AVE  
NORTH MIAMI BEACH, FL 33162**

Mailing Address  
**16800 NE 2 AVE  
NORTH MIAMI BEACH, FL 33162**



01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2070440**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**STEELE, MARILYN L.  
16800 N.E. 2ND AVENUE  
N. MIAMI, FL 33162**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	STEELE, MARILYN L.
STREET ADDRESS	16800 N.E. 2ND AVENUE
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	V
NAME	STEELE, MICHAEL J.
STREET ADDRESS	16800 N.E. 2ND AVENUE
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	ST
NAME	MCBRIDE, CAROL L.
STREET ADDRESS	16800 N.E. 2ND AVENUE
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000579464  
01/10/07-80008-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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:** **MARILYN STEELE**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/4/07** **3056532440x11**  
Date Daytime Phone #