## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000003452

STEINRUECK, INGEMAR

FRONDENBERG, GERMANY, DE 58730

AM KLINGELBACH 2

Name:

Address:

City-St-Zip:

FILED Jan 28, 2008 Secretary of State

Entity Nan	ne: MMTD	MANAGEMENT I	NC.					
Current Principal Place of Business:				Nev	New Principal Place of Business:			
615 CHIPP HARVARD	EWA DRIV , IL 60033	Ξ						
Current Mailing Address:				Nev	New Mailing Address:			
525 W. MC SUITE 236	NROE STR	REET						
CHICAGO,		US						
FEI Number:	59-3516463	FEI Number Ap	plied For()	FEI Number I	Not Appl	licable ( )	Certificate of Status	s Desired ( )
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
1200 SOUT	ORATION S TH PINE ISL ON, FL 333	AND ROAD						
The above in the State		ty submits this stat	tement for the pu	rpose of cha	nging i	ts registere	d office or registered	agent, or both,
SIGNATUR	RE:							
	Electi	onic Signature of	Registered Agen	t			Date	
Election Can	npaign Financ	ing Trust Fund Cont	ribution ( ).					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD SABEL, DAV 615 CHIPPE HARVARD, I	WA DRIVE		Title: Nam Addr City-	e:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AM KLINGEI	( ) Delete , WOLFGANG .BACH 2 ERG, GERMANY, DE	58730	Title: Nam Addr City-	e:	AM KLINGE	(X) Change () Addition R, WOLFGANG LBACH 2 IBERG, GERMANY, DE 5	58730
Title: Name: Address: City-St-Zip:	THIEDMANN	ÎROE STREET, SUITE	E 2360	Title: Nam Addr City-	e:		( ) Change ( ) Addition	
Title:	D	( ) Delete		Title:		D	(X) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

STEINRUECK, INGEMAR

FROENDENBERG, GERMANY, DE 58730

AM KLINGELBACH 2

SIGNATURE: KLAUS U. THIEDMANN S. 01/28/2008