

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # J66377

1. Entity Name
**M & M ELECTRIC COMMERCIAL APPLIANCE SERVICE,
INC.**



Principal Place of Business
**4797 49TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

Mailing Address
**4797 49TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

DO NOT WRITE IN THIS SPACE



06282005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2794135

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DOBSON, BRENDA K.
4797 - 49TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

**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: _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PS
NAME DOBSON, BRENDA K.
STREET ADDRESS 4797 49TH AVENUE N
CITY - ST - ZIP SAINT PETERSBURG, FL 33714

TITLE V
NAME DOBSON, GEORGE A
STREET ADDRESS 4797 49TH AVE N
CITY - ST - ZIP SAINT PETERSBURG, FL 33714

TITLE T
NAME DOBSON, RICHARD K
STREET ADDRESS 4797 49TH AVE N
CITY - ST - ZIP SAINT PETERSBURG, FL 33714

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000370605
07/05/05-80023-014 150.00

**DO NOT WRITE
IN THIS SPACE**

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: *Brenda Dobson* **Brenda Dobson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-30-05

Date

727-525-5482

Daytime Phone #