


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000003502
 1. Entity Name
 M & D INSTALLATIONS LLC



Principal Place of Business: 21034 ESCONDIDO WAY NORTH, BOCA RATON, FL 33433
 Mailing Address: 21034 ESCONDIDO WAY NORTH, BOCA RATON, FL 33433



05102005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 06-1621513	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 GLASSBERG, ROY
 123 NW 13TH STREET, SUITE 313
 BOCA RATON, FL 33432

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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 _____

**Filing Fee is \$50.00
 Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BARRETT, DEREK A 21034 ESCONDIDO WAY NORTH BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM YODANIS, MARK 2933 NW 6TH TERRACE WILTON MANORS, FL 33311
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: [Signature] Date: May 10, 2005 Daytime Phone #: 561-302-1946

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE