

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009325

FILED  
Sep 13, 2007  
Secretary of State

**Entity Name:** M & M RESTAURANT ENTERPRISES, LLC

**Current Principal Place of Business:**

4809 W. HWY 98  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

4809 W. HWY 98  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 59-3723869      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BURKE, M. TODD ESQ  
BURKE & BLUE PA  
215 GRAND BOULEVARD, SUITE 101  
DESTIN, FL 32550 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HARBISON, MATTHEW B  
Address: 4809 W. HWY 98  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM ( ) Delete  
Name: HARBISON, MYNTA S  
Address: 4809 W. HWY 98  
City-St-Zip: PANAMA CITY, FL 32401

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic 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: MATTHEW B. HARBISON

MGR

09/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date