2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000033078 1. Entity Name M & M INVESTMENTS LLC		FILED 2005 JAN 19 PM 12: 38				
Mailing Address		-	1			
4371 SW 13 TERRACE MIAMI, FL 33134		TALLAHASSEE, FLORIDA				
siness 3. Mailing Address						
Suite, Apt. #, etc.		01182005	Chg-LLC	CR2E083 (10/03)		
City & State		4. FEI Numbe	r	-	plied For ot Applicable	
Zip	Country	5. Certificate of Status Des		S5.00 Add Fee Require		
dstered Agent	Name	7. Name and	Address of New R	egistered Agent		
MARTINEZ, MAGDIEL Street Address			(P.O. Box Number is Not Acceptable)			
171 SW 13 TERRACE Street Address HAMI, FL 33134		W. O. Son Marion Control (Control (Cont				
City			FL Zip Code			
8. The above named entity submits this posterior 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 sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida. I am familiar with, and accept the obligations of registered sparing of the state of Florida sparing						
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State			
···-	10.	<u>'</u>	ADDITIONS			
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☐ Delete	ł			☐ Channe	Addition	
L Desca	NAME STREET ADDRESS CITY-ST-ZIP			,.		
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☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5 01/2	00045 0/050103	□ Change 3104545 39007 **50	Addition	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		☐ Change	Addition	
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am a managing member or manager of the limited liability company or the receiver or troops ampowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: Date Date						
	4371 SW 13 TERRACE MIAMI, FL 33134 5. Mailing Address Suite, Apt. #, etc. City & State Zip platered Agent a purpose of changing its results it applicable. (NOTE: if Delete Delete Delete Delete Delete Delete Delete	A371 SW 13 TERRACE MIAMI, FL 33134 D. Mailing Address Suite, Apt. #, etc. City & State Zip Country pastered Agent Name Street Address City a purpose of changing its registered office or regist the i applicable. (NOTE Registered Agent signature requisite in AME STREET ADDRESS CITY-ST-ZIP Delets TITLE NAME STREET ADDRESS CITY-ST-ZIP Delets TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-	4371 SW 13 TERRACE MIAMI, FL 33134 D. Mailling Address Suite, Apt. #, etc. City & State Zip Country 5. Certificate Zip City Street Address (P.O. Box Number City city Purpose of changing its registered office or registered agent, or both City Purpose of changing its registered Agent agenture required when renatating) (NOTE Registered Agent agenture required when renatating) /MANAGERS 10. Interest Address CITY-ST-2P Delete Inte	A371 SW 13 TERRACE MIAMI, FL 33134 I. Mailing Address Suite, Apt. #, etc. City & State Zip Country S. Certificate of Status Desired 7. Name and Address of New R Street Address (P.O. Box Number is Not Acceptable City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice City Depurpose of changing its registered office or registered agent, or both, in the State of Fice Its Registered Address (P.O. Box Number is Not Acceptable Fioridal Fioridal Make STRET ADORESS CITY-ST-2P Delete TILE NAME STRET ADORESS CITY-ST-2	### Agricults Authority A	