

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123585

FILED
Feb 02, 2006
Secretary of State

Entity Name: M&M HAULING & EQUIPMENT LLC

Current Principal Place of Business:

844 SW 74TH AVENUE
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

844 SW 74TH AVENUE
NORTH LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 20-4076124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TENN, MARK W
844 SW 74TH AVENUE
NORTH LAUDERDALE, FL 33068 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: TENN, MARK W
Address: 844 SW 74TH AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TENN, MARK W
Address: 844 SW 74TH AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: MGRM () Change (X) Addition
Name: COOMBS, MICHAEL A
Address: 844 SW 74TH AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: MGRM () Change (X) Addition
Name: COOMBS, KIM M
Address: 844 SW 74TH AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK TENN

MGRM

02/02/2006

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