2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M56950

Entity Name: MMG TRANSPORTATION, INC.

FILED May 02, 2007 Secretary of State

Current Princip	oal Place of Business:	New Princi	pal Place of Business

C/O LOUIS A. MINARDI JR. 4413 N. HESPERIDES ST. 502 N. ORGEON AVE TAMPA, FL 33614

TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

C/O LOUIS A. MINARDI JR.

502 N. ORGEON AVE
TAMPA, FL 33606

C/O LOUIS A. MINARDI JR.
4413 N. HESPERIDES ST.
TAMPA, FL 33614

FEI Number: 59-2867971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MINARDI, GLENN A 502 N. OREGON AVE. TAMPA, FL 33606 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MINARDI, LOUIS A JR MINARDI, LOUIS A JR Name: Name: 502 N OREGON AVE 4413 N. HESPERIDE ST Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33614

Title: STD () Delete Title: STD (X) Change () Addition Name: MINARDI, GLENN A Name: MINARDI, GLENN A

Name:MINARDI, GLENN AName:MINARDI, GLENN AAddress:502 N OREGON AVEAddress:4413 N. HESPERIDES ST.City-St-Zip:TAMPA, FLCity-St-Zip:TAMPA, FL33614

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MINARDI, JOSEPH
 Name:
 MINARDI, JOSEPH

 Address:
 502 N. OREGON
 Address:
 4413 N. HESPERIDES ST.

 City-St-Zip:
 TAMPA, FL
 33614

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN MINARDI SEC. 05/02/2007