2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

May 31, 2005 08:00 AM Secretary of State **DOCUMENT # P01000014700** 1. Entity Name M.M.M.& A., INC. Principal Place of Business Mailing Address 855 N. ALAFAYA TRAIL 2598 ELWICK ST. ORLANDO, FL 32828 OCOEE, FL 34761 CR2E034 (10/03) 03282005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3697226 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LADISA, MICHAEL N DO NOT WRITE 2598 ELWICK ST. OCOEE, FL 34761 IN THIS SPACE 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_ Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent stanature required whon reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE LADISA, MICHAEL N NAME STREET ADDRESS 2598 ELWICK ST. CITY-ST-ZIP OCOEE, FL 34761 U00000368596 05/31/05-80005-006 150.00 TITLE LADISA, MICHAEL NAME 12148 REBECCA'S RUN DR. STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 TIT! F NAME LADISA, ALENA M STREET ADDRESS 2598 ELWICK ST. DO NOT WRITE CITY-ST-ZIP OCOEE, FL 34761 IN THIS SPACE TITLE LADISA, MARY ANN NAME 12148 REBECCA'S RUN DR. STREET ADDRESS. WINTER GARDEN, FL 34787 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

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