## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 03, 2005 08:00 AM DOCUMENT # P01000046598 **Secretary of State** 1. Entity Name MUCH AND MORE INC. Principal Place of Business Mailing Address 3600 YACHT CLUB DRIVE 3600 YACHT CLUB DRIVE 2003 2003 AVENTURA, FL 33180 AVENTURA, FL 33180 01122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1103465 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent POIRIER, MARCEE B DO NOT WRITE 2701 S BAYSHORE DR, SUITE 402 MIAMI, FL 33133 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 agont and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE PAPER, MARC NAME 3600 YACHT CLUB DRIVE #2003 STREET ADDRESS U00000249817 03/03/05-80019-003 150.00 CITY-ST-ZIP AVENTURA, FL 33180 TITLE PAPER, MARTINE L NAME STREET ADDRESS 3600 YACHT CLUB DRIVE #2003 AVENTURA, FL 33180 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS C!TY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(1), 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CRY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

THE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/01/05

Daytime Phone #

**FILED**