



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90336 017 ***158.75

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|--|--|---|--|---|--|
| DOCUMENT # P01000061953 1. Entity Name M & M INTERNATIONAL AEROSPACE METALS, INC. | | | |  | |
| Principal Place of Business 1300 NW 65TH PLACE SUITE B FT. LAUDERDALE, FL 33309 | | | Mailing Address 1300 NW 65TH PLACE SUITE B FT. LAUDERDALE, FL 33309 | | |
| 2. Principal Place of Business 1382 W McNab Rd Suite, Apt. #, etc. | | 3. Mailing Address 1382 W McNab Rd Suite, Apt. #, etc. | |  | |
| City & State Ft. Laud FLorida | | City & State Ft Lauderdale, FL | | 4. FEI Number 59-3724566 | |
| Zip 33309 | | Country Broward | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent FERGUSON, JOHN P PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32115-2491 | | | | 7. Name and Address of New Registered Agent Name Tina D. Muldoon Street Address (P.O. Box Number is Not Acceptable) 1382 W McNab Road City Ft. Lauderdale FL Zip Code 33309 | |
| 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 _____ DATE 04-11-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | | 9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | CEO MULDOON, TINA 1300 NW 65TH PLACE SUITE B FT. LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY- ST- ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| 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. | | | | | |
| SIGNATURE: _____ DATE 04-11-04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |