


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90074 003 ***150.00

DOCUMENT # P02000030355 1. Entity Name MAY CONSULTING AND MARKETING GROUP INC.																																			
Principal Place of Business 16085 N.W. 64 AVE #204 MIAMI LAKES, FL 33014		Mailing Address 16085 N.W. 64 AVE #204 MIAMI LAKES, FL 33014																																	
2. Principal Place of Business - No P.O. Box # 7765 W 36th Ave		3. Mailing Address 7765 W 36th Ave																																	
Suite, Apt. #, etc. #1		Suite, Apt. #, etc. #1																																	
City & State Hialeah, FL		City & State Hialeah, FL																																	
Zip 33018		Zip 33018																																	
Country		Country																																	
4. FEI Number 35-2162785		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent MARTINEZ-MOLES, CANDIDA I 16085 N.W. 64 AVE #204 MIAMI LAKES, FL 33014		7. Name and Address of New Registered Agent Name Queipo, Manuel L Street Address (P.O. Box Number is Not Acceptable) 7765 W 36th Ave #1 City Hialeah FL Zip Code 33018																																	
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 <u><i>Candida Martinez-Moles</i></u> 3-27-07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:40%;">NAME</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>MARTINEZ-MOLES, CANDIDA</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td>1065 NW 64 AVE #204</td> <td></td> </tr> <tr> <td></td> <td></td> <td>MIAMI LAKES, FL 33014</td> <td></td> </tr> </table>		TITLE	P	NAME	<input checked="" type="checkbox"/> Delete	STREET ADDRESS		MARTINEZ-MOLES, CANDIDA		CITY-ST-ZIP		1065 NW 64 AVE #204				MIAMI LAKES, FL 33014		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:40%;">NAME</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>Queipo, Manuel L</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td>7765 W 36th Ave #1</td> <td></td> </tr> <tr> <td></td> <td></td> <td>Hialeah, FL 33018</td> <td></td> </tr> </table>		TITLE	P	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		Queipo, Manuel L		CITY-ST-ZIP		7765 W 36 th Ave #1				Hialeah, FL 33018	
TITLE	P	NAME	<input checked="" type="checkbox"/> Delete																																
STREET ADDRESS		MARTINEZ-MOLES, CANDIDA																																	
CITY-ST-ZIP		1065 NW 64 AVE #204																																	
		MIAMI LAKES, FL 33014																																	
TITLE	P	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																
STREET ADDRESS		Queipo, Manuel L																																	
CITY-ST-ZIP		7765 W 36 th Ave #1																																	
		Hialeah, FL 33018																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP																	
TITLE	<input type="checkbox"/> Delete																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP																	
TITLE	<input type="checkbox"/> Delete																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP																	
TITLE	<input type="checkbox"/> Delete																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP																	
TITLE	<input type="checkbox"/> Delete																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																		
NAME																																			
STREET ADDRESS																																			
CITY-ST-ZIP																																			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an other like empowered.																																			
SIGNATURE: <u><i>Manuel L Queipo</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3-27-07 <small>Date Daytime Phone #</small>																																	