

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108610

Entity Name: M & M SERVICE ASSOCIATES INC.

FILED
May 14, 2007
Secretary of State

Current Principal Place of Business:

165 NW 96 TERR
201
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

17019 NW 23RD STREET
PEMBROKE PINES, FL 33028 US

Current Mailing Address:

165 NW 96 TERRACE., APT #201
PEMBROKE PINES, FL 33024

New Mailing Address:

17019 NW 23RD STREET
PEMBROKE PINES, FL 33028

FEI Number: 75-3084075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORONA, MARIA
165 NW 96 TERR
APT 201
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

SUCO, MARIA
17019 NW 23RD STREET
PEMBROKE PINES, FL 33028 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: MARIA SUCO

05/14/2007

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:

Title: D () Delete
Name: CORONA, MARIA
Address: 150 NW 96 AVE, 102
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: CORONA, FELIPE
Address: 165 NW 96 TERR
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SUCO, MARIA
Address: 17019 NW 23RD STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARIA SUCO

D

05/14/2007

Electronic Signature of Signing Officer or Director

Date