

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023288

FILED
May 17, 2004
Secretary of State

Entity Name: M & M TRAVEL GOODS AND GIFTS, INC.

Current Principal Place of Business:

3800- 105 W 18TH AVE
HIALEAH, FL 33012

New Principal Place of Business:

1315 EAST LANDSTREET ROAD
ORLANDO, FL 32824

Current Mailing Address:

3800- 105 W 18TH AVE
HIALEAH, FL 33012

New Mailing Address:

7282 NW 33RD STREET
MIAMI, FL 33122

FEI Number: 34-1975109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, LUZ M
3800- 105 W 18TH AVE
HIALEAH, FL 33012

Name and Address of New Registered Agent:

TORRES, LUZ M
11211 SW 158 STREET
MIAMI, FL 33157

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: LUZ M. TORRES

05/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: TORRES, LUZ M
Address: 6531 NW 38 TERRACE #3
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: P () Delete
Name: MARRERO, MARIO
Address: 11015 NW 9 ST CIRCLE
City-St-Zip: MIAMI, FL 33172

Title: V () Delete
Name: GOMEZ, YOCKZER
Address: 2201 W 52 ST #109
City-St-Zip: HIALEAH, FL 33016

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: TORRES, LUZ M
Address: 11211 SW 158 STREET
City-St-Zip: MIAMI, FL 33157

Title: VP (X) Change () Addition
Name: MARRERO, MARIO
Address: 11015 NW 9 ST CIRCLE
City-St-Zip: MIAMI, FL 33172

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

Title: PD () Change (X) Addition
Name: GENTILE, KATHY
Address: 14326 CARTELLA DR.
City-St-Zip: LA MIRADA, CA 90638

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUZ M. TORRES

ST

05/17/2004

Electronic Signature of Signing Officer or Director

Date