

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000123218

Entity Name: D & M FUN FACTORY, INC.

**FILED**  
**Nov 04, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1392-1394 SW 160TH AVENUE  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

3348 BRADENHAM LANE  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 80-0081598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DRUCKER, A. NORMAN  
801 NE 167TH ST STE 308  
N MIAMI BCH, FL US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MURPHY, JULIE  
Address: 1781 ASPEN LANE  
City-St-Zip: WESTON, FL

Title: VPT ( ) Delete  
Name: DRUCKER, MICHELE A  
Address: 3348 BRADENHAM LANE  
City-St-Zip: DAVIE, FL 33328

Title: S (X) Delete  
Name: LEBLANC, CARLENE  
Address: 1392 SW 160TH AV  
City-St-Zip: SUNRISE, FL 33326

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: MICHELE DRUCKER

VPT

11/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date