2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033365

Entity Name: M & M SERVICES HEPA COMPANY, INC

FILED Mar 30, 2006 Secretary of State

Littly Na	ille. IVI & IVI SI	LRVICES HEFA COMFAINT, II	VC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3828 N.W. 2ND AVENUE MIAMI, FL 33127				52 CHERRY ST ANDREWS, NC 28901		
Current Mailing Address:			New Maili	New Mailing Address:		
POST OFFICE BOX 325 TOPTON, NC 28781				POST OFFICE BOX 607 ANDREWS, NC 28901		
FEI Number: 68-0805869 FEI Number Applied For () FE			FEI Number Not App	umber Not Applicable () Certificate of Status Desired ()		
Name and	d Address of (Current Registered Agent:	Name and	l Address of	New Registered Agent:	
PIKE, MIC 52 CHERF ANDREW NC, FL 28	RY ST S					
	e named entity e of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip: Title:	PIKE, VIRGINI 3828 N.W. 2NI MIAMI, FL 33 ² VP (0 AVENUE 127) Delete	Title: Name: Address: City-St-Zip: Title:	PIKE, VIRGII P O BOX 607 ANDREWS, I	7	
Name: Address: City-St-Zip:	SMITH, MICHA 3840 VILLA RI POWDER SPF		Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	S/T (PIKE, MICHAE 3828 NW 2ND MIAMI, FL 33	AVENUE	Title: Name: Address: City-St-Zip:	S/T PIKE, MICHA P O BOX 607 ANDREWS, I	7	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR PIKE, GINA M P O BOX 607 ANDREWS, I	7	

I hereby certify that the information supplied with this filing does not qualify for the 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: VIRGINIA PIKE P 03/30/2006