2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000050465

Entity Name: M & L PROJECT SERVICES, INC.

FILED Feb 23, 2005 Secretary of State

Current Principal Place of Business:			New Pri	New Principal Place of Business:	
137 ALAFA SEFFNER,	RA STREET FL 33584				
Current Mailing Address:			New Ma	New Mailing Address:	
137 ALAFARA STREET SEFFNER, FL 33584					
FEI Number:	34-1988190	FEI Number Applied For ()	El Number Not A	pplicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US			137 ALA	MASTRACCO, ALESSANDRA L P 137 ALAFARA STREET SEFFNER, FL 33584 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: ALESSANDRA L MASTRACCO				02/23/2005	
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () MASTRACCO, M 137 ALAFARA S SEFFNER, FL 3	TREET	Title: Name: Address: City-St-Zip	P (X) Change () Addition MASTRACCO, ALESSANDRA L 137 ALAFARA STREET D: SEFFNER, FL 33584	
Title: Name: Address: City-St-Zip:	VPST () MASTRACCO, A 137 ALAFARA S SEFFNER, FL 3	TREET	Title: Name: Address: City-St-Zip	VPT (X) Change () Addition MASTRACCO, ALESSANDRA L 137 ALAFARA STREET D: SEFFNER, FL 33584	
Title: Name: Address: City-St-Zip:	VP () SIMPSON, ROB 137 ALAFARA S SEFFNER, FL 3	TREET	Title: Name: Address: City-St-Zip	VP (X) Change () Addition SIMPSON, ROBERT M 137 ALAFARA STREET D: SEFFNER, FL 33584	
Title: Name: Address: City-St-Zip:	VP () WALLACE, RUB 137 ALAFARA S SEFFNER, FL 3	TREET	Title: Name: Address: City-St-Zip	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () GRAY, III, LONN 137 ALAFARA S SEFFNER, FL 3	TREET	Title: Name: Address: City-St-Zip	() Change () Addition	
Title: Name:	()	Delete	Title: Name:	S () Change (X) Addition RYMAN, JEAN A 137 ALAFARA STREET	

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.

City-St-Zip: SEFFNER, FL 33584

SIGNATURE: ALESSANDRA L MASTRACCO P 02/23/2005

City-St-Zip: