

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000063157

1. Entity Name  
**M & M AUTOMOTIVE AND DIAGNOSTICS, INC**



Principal Place of Business  
**109 GRETCHEN AVE S  
 LEHIGH ACRES, FL 33971**

Mailing Address  
**109 GRETCHEN AVE S  
 LEHIGH ACRES, FL 33971**



05022006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. Filing Number: **54-2150067**  Applied For  Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SPECIAL, MARIO B  
 17577 MOORFIELD DR  
 FT MYERS, FL 33908**

**DO NOT WRITE  
 IN THIS SPACE**

8. 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 (as applicable) and accepts the obligations of registered agent.

SIGNATURE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

**D  
 SPECIAL, MARIO B  
 17577 MOORFIELD DR  
 FT MYERS, FL 33908**

000000560325  
 05/18/06-80034-021 150.00

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 IN THIS SPACE**

12. I hereby certify that the information furnished with this filing complies with the requirements contained 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 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 of the same empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if an agent, or on an attachment to this address, with an official employment.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR