


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90025 030 ***158.75

DOCUMENT # P04000072090 1. Entity Name M & J SALES, INC	
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Principal Place of Business 10244 SW 23RD COURT MIRAMAR, FL 33025 US	Mailing Address 10244 SW 23RD COURT MIRAMAR, FL 33025 US
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4000-



2. Principal Place of Business - No P.O. Box # 3052 GLENRIDGE CIRCLE Suite, Apt. #, etc.	3. Mailing Address 3052 GLENRIDGE CIRCLE Suite, Apt. #, etc.
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04072007 Chg-P CR2E034 (12/06)

City & State MERRITT ISLAND, FL	City & State MERRITT ISLAND, FL 32000
Zip 32953	Zip 32953
Country BREVARD	Country BREVARD

4. FEI Number 20-1102830	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WOOD, JOY 10244 SW 23RD COURT MIRAMAR, FL 33025

7. Name and Address of New Registered Agent Name JOY WOOD
Street Address (P.O. Box Number is Not Acceptable) 3052 GLENRIDGE CIRCLE
City MERRITT ISLAND FL
Zip Code 32953

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *J Wood* (NOTE: Registered Agent signature required when reinstating) DATE: 4/7/2007

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		Delete
TITLE	PRES	<input type="checkbox"/>
NAME	WOOD, JOY	
STREET ADDRESS	10244 SW 23RD COURT	
CITY-ST-ZIP	MIRAMAR, FL 33025	
TITLE	TREA	<input type="checkbox"/>
NAME	WOOD, MICHAEL L	
STREET ADDRESS	10244 SW 23RD COURT	
CITY-ST-ZIP	MIRAMAR, FL 33025	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		Change	Addition
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *J Wood* DATE: 4/7/2007 DAYTIME PHONE #: 321.459.5542