

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141927

FILED
Apr 24, 2007
Secretary of State

Entity Name: M&M CONSULTING EXPORT CORPORATION

Current Principal Place of Business:

1000 PARKVIEW DR
SUITE# 927
HALLANDALE, FL 33009 US

Current Mailing Address:

1000 PARKVIEW DR
SUITE# 927
HALLANDALE, FL 33009 US

New Principal Place of Business:

2640 S UNIVERSITY DR.
SUITE# 220
FT. LAUDERDALE, FL 33328 US

New Mailing Address:

2640 S UNIVIRSIY DR.
SUITE# 220
FT. LAUDERDALE, FL 33328 US

FEI Number: 56-2484508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLMENARES, JUAN J
1000 PARKVIEW DR
SUITE # 927
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

COLMENARES, JUAN J
2640 S UNIVERSITY DR.
SUITE # 220
FT. LAUDERDALE, FL 33328 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: JUAN COLMENARES

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLMENARES, JUAN J
Address: 1000 PARKVIEW DR SUITE # 927
City-St-Zip: HALLANDALE, FL 33009 US

Title: VP () Delete
Name: GOMEZ, MORELLA C
Address: 1000 PARKVIEW DR SUITE # 927
City-St-Zip: HALLANDALE, FL 33009 US

Title: T () Delete
Name: COLMENARES, JUAN J
Address: 1000 PARKVIEW DR SUITE # 927
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLMENARES, JUAN J
Address: 2640 S UNIVERSITY DR. # 220
City-St-Zip: FT. LAUDERDALE, FL 33328 US

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

Title: T (X) Change () Addition
Name: COLMENARES, JUAN J
Address: 2640 S UNIVERSITY DR. # 220
City-St-Zip: FT. LAUDERDALE, FL 33328 US

I hereby certify that the information supplied with this filing does not qualify 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: JUAN COLMENARES

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date