2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006
Secretary of State

DOCUMENT# P04000165837

Entity Name: 4M HOLDINGS INC

Current Principal Place of Business:

PO BOX 162
SAN ANTONIO, TX 33576

New Principal Place of Business:

PO BOX 162
SAN ANTONIO, FL 33576

Current Mailing Address:

PO BOX 162
SAN ANTONIO, FL 33576

New Mailing Address:

FEI Number: 20-1979789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELLUSO, MARK A
36951 SR 54 W
ZEPHYRHILLS, FL 33541 US

Name and Address of New Registered Agent:

MIDILI, PAUL P
32939 COLLEGE AVE
SAN ANTONIO, FL 33576 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: PAUL P. MIDILI 05/19/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: MIDILI, PAUL
Address: PO BOX 162
City-St-Zip: SAN ANTONIO, FL 33576

Title: VP ( ) Delete
Name: MIDILI, JOSEPH P
Address: PO BOX 743
City-St-Zip: SAN ANTONIO, FL 33576

Title: SEC ( ) Delete
Name: MIDILI, DENISE
Address: PO BOX 162
City-St-Zip: SAN ANTONIO, FL 33576

Title: TRES ( ) Delete
Name: MIDILI, PATRICK K
Address: 18415 SWAN LAKE RD
City-St-Zip: LUTZ, FL 33549

Title: SHD ( ) Delete
Name: MIDILI, JOHN
Address: PO BOX 162
City-St-Zip: SAN ANTONIO, FL 33576

Title: SHD ( ) Delete
Name: MIDILI, JAMES C
Address: 9571 SW 3RD CT
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: PAUL P. MIDILI PRES 05/19/2006
Electronic Signature of Signing Officer or Director Date