

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165837

Entity Name: 4M HOLDINGS INC

FILED  
May 02, 2007  
Secretary of State

## Current Principal Place of Business:

PO BOX 162  
SAN ANTONIO, FL 33576

## New Principal Place of Business:

32939 COLLEGE AVE  
P. O. BOX 189  
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:

MIDILI, PAUL P  
32939 COLLEGE AVE  
SAN ANTONIO, FL 33576 US

## Name and Address of New Registered Agent:

MIDILI, PAUL P  
32206 PASCO RD  
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:

05/02/2007

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 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 MIDILI

V

05/02/2007

Electronic Signature of Signing Officer or Director

Date