

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90183 032 ***150.00

DOCUMENT # P05000054772

1. Entity Name

M & M PETS INC.



Principal Place of Business

2215 SW 2ND STREET
POMPANO BEACH FL 33069

Mailing Address

12009 NW 25TH STREET
CORAL SPRINGS FL 33065



2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

3. Mailing Address

2215 SW 2nd St.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

Pompano Beach, FL.

4. FEI Number 20-2676199

Applied For

Not Applicable

Zip

Country

Zip

33069

Country

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIEGEL, MITCH B
12009 NW 25TH STREET
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SIEGEL, MARGARET P
12009 NW 25TH STREET
CORAL SPRINGS FL 33065 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SIEGEL, MITCH B
12009 NW 25TH STREET
CORAL SPRINGS FL 33065 ☐ Delete

TITLE
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
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CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Mitch Siegel

Mitch Siegel

Date

4-7-07

Daytime Phone #

954-781-7800