2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083373

Entity Name: 2M SQUARED, INC.

FILED Apr 29, 2007 Secretary of State

P.O. BOX 1771 7226 W. COLONIAL DR.

WINDERMERE, FL 34786 SUITE 170

ORLANDO, FL 32818

Current Mailing Address: New Mailing Address:

7226 W. COLONIAL DR. P.O. BOX 1771 WINDERMERE, FL 34786 SUITE 170 ORLANDO, FL 32818

FEI Number: 20-2971317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMALL BUSINESS RESOURCES USA, INC. 773 S. KIRKMAN RD. SUITE 118 ORLANDO, FL 32811 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: MUSALIMADUGU, CARRIE A MUSALIMADUGU, CARRIE A Name: Name:

P.O. BOX 1771 7226 W. COLONIAL DR., SUITE 170 Address: Address:

ORLANDO, FL 32818 City-St-Zip: WINDERMERE, FL 34786 City-St-Zip:

Title: VΡ Title: VΡ (X) Change () Addition () Delete Name: MARTINEZ, LUIS E Name: MARTINEZ, LUIS E

P.O. BOX 1771 7226 W. COLONIAL DR., SUITE 170 Address: Address: ORLANDO, FL 32818 WINDERMERE, FL 34786

City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete MUSALIMADUGU, SANJEEV MUSALIMADUGU, SANJEEV Name: Name: 7226 W. COLONIAL DR., SUITE 170 P.O. BOX 1771 Address: Address:

City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: ORLANDO, FL 32818

Title: () Delete Title: (X) Change () Addition

MARTINEZ, JENNIFER S MARTINEZ, JENNIFER S Name: Name:

Address: P.O. BOX 1771 Address: 7226 W. COLONIAL DR., SUITE 170 City-St-Zip: City-St-Zip: WINDERMERE, FL 34786 ORLANDO, FL 32818

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: LUIS E. MARTINEZ **MGRM** 04/29/2007