


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000049953 1. Entity Name M & J BUILDING SUPPLY, INC.	
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Principal Place of Business 1880 DR ANDRES WAY BAY 5 DRLRAY BCH, FL 33445	Mailing Address 1880 DR ANDRES WAY BAY 5 DRLRAY BCH, FL 33445
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DO NOT WRITE IN THIS SPACE



01192008 No Chg-P CR2E034 (11/05)

4. FEI Number 84-1709127	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SOTO, JENNIFER 1602 13TH AVE N LAKE WORTH, FL 33460
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**DO NOT WRITE
IN THIS SPACE.**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000799339 01/30/08-80065-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOTO, MIGUEL 1602 13TH AVE N LAKE WORTH, FL 33460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOTO, JENNIFER 1602 13TH AVE N LAKE WORTH, FL 33460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SOTO, GERI 1602 13TH AVE N LAKE WORTH, FL 33460
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Jennifer Soto</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>1-24-08</u> <u>561</u> <small>Date Daytime Phone #</small>