

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050025

FILED
Feb 04, 2008
Secretary of State

Entity Name: M T M INDUSTRIAL SUPPLIES CORP.

Current Principal Place of Business:

9737 NW 41 ST., STE 325
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

9737 NW 41 ST., STE 325
MIAMI, FL 33178

New Mailing Address:

FEI Number: 20-4656712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OTERO, TERESITA
PROFESSIONAL BUSINESS ADVISORS, INC.
11401 SW 40TH ST., STE 201
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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:

Title: PVSD () Delete
Name: MARTINS DE FRITAS, RAFAEL
Address: AVE. PPAL JORGE COLL, EDIF GUATACARE PARK
City-St-Zip: ESTADO NUEVA ESPARTA,VENEZU, OC

Title: TD () Delete
Name: TORRES, MAIGUALIDA
Address: 1550 BRICKELL AVE #206B
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MAIGUALIDAD TORRES

D

02/04/2008

Electronic Signature of Signing Officer or Director

_____ Date