

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068743

FILED  
Jul 07, 2008  
Secretary of State

Entity Name: M AND J COMMERCIAL SERVICES, INC

## Current Principal Place of Business:

8925 FOREST STREET  
FORT MYERS, FL 33907

## New Principal Place of Business:

2324 GRAND AVE  
SUITE #6  
FORT MYERS, FL 33901

## Current Mailing Address:

8925 FOREST STREET  
FORT MYERS, FL 33907

## New Mailing Address:

2324 GRAND AVE  
SUITE # 6  
FORT MYERS, FL 33901

FEI Number: 20-4794789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLACK, JOMEN S  
8925 FOREST STREET  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

BLACK, JOMEN S  
2324 GRAND AVE  
SUITE #6  
FORT MYERS, FL 33901 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: JOMEN BLACK

07/07/2008

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: PD ( ) Delete  
Name: BLACK, JOMEN S  
Address: 8925 FOREST STREET  
City-St-Zip: FORT MYERS, FL 33907

Title: TSD ( ) Delete  
Name: BLACK, MEGAN  
Address: 8925 FOREST STREET  
City-St-Zip: FORT MYERS, FL 33907

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: BLACK, MEGAN  
Address: 8925 FOREST STREET  
City-St-Zip: FORT MYERS, FL 33907

Title: TD ( ) Change (X) Addition  
Name: BURNETT, SAMUEL  
Address: 7243 REYMOOR DR  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: JOMEN BLACK

PD

07/07/2008

Electronic Signature of Signing Officer or Director

Date