## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

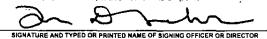
## FILED Jan 31, 2008 08:00 AN Secretary of State

DOCUMENT # P95000022043  1. Entity Name MDM & ASSOCIATES, INC.				Secretary of Sta		
3016 WINDV	se of Business NARD DR E, FL 34949 US	Mailing Address 3016 WINDWARD DR FORT PIERCE, FL 34949	US			1818   1811   BRIII BERREN   111   1861   1861
DO NOT WRITE IN THIS SPA			CE	01052008  4. FEI Number 65-057	er	2E034 (11/05)    Applied For   Not Applicable   \$8.75 Additional
	6. Name and Address of Current Re			J. Commodic	or diates search	Fee Required
SUITE 320 STUART,	EDERAL HWY	ne purpose of changing its registe	ered office or register	IN 7	NOT WRITHIS SPACE	E
SIGNATURE_					<del></del>	
1	Signature, typod or printed name of registered agent and	litle if applicable (NOTE; Registe	ered Agent signature required	when reinstating)	DA	TE .
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fin     Trust Fund Contribution	ancing <b>\$5.</b> n. $\square$ Add	.00 May Be ed to Fees	٠.	
10.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP	OFFICERS AND DIF P MAHR, MALCOLM 3016 WINDWARD DR FORT PIERCE, FL 34949	RECTORS		,		
TITLE NAME STREET ADDRESS				V.	0000008070 02/06/08~8006	57 7-012 150.00
TITLE NAME						
STREET ADDRESS CITY-ST-ZIP	<u> </u>		]	DO	NOT WRI	TE
TITLE				IN 7	THIS SPAC	E

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:

SIREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
SIREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS



01-28.09

465-3289

Date

Daytime Phone #