

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000090234

Entity Name: M & M ASSOCIATES, INC.

FILED  
Jan 17, 2005  
Secretary of State

**Current Principal Place of Business:**

4111 SW 25TH STREET  
FORT LAUDERDALE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

4111 SW 25TH STREET  
FORT LAUDERDALE, FL 33317 US

**New Mailing Address:**

FEI Number: 65-0789910

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, DEANNA  
4111 SW 25TH STREET  
FORT LAUDERDALE, FL 33317 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: P ( ) Delete  
Name: MILLER, DEANNA  
Address: 59 KENILWORTH ROAD  
City-St-Zip: RYE, NY 10580

Title: VP ( ) Delete  
Name: MILLER, AMY R  
Address: 59 KENILWORTH ROAD  
City-St-Zip: RYE, NY 10580

Title: S ( ) Delete  
Name: COLBY, SUSAN J  
Address: 103 OLD ORCHARD ROAD  
City-St-Zip: PORT CHESTER, NY 10573

Title: T ( ) Delete  
Name: MILLER, STEVEN E  
Address: 10 COUNTRY RIDGE DRIVE N.  
City-St-Zip: PORTCHESTER, NY 10573

Title: VP ( ) Delete  
Name: MILLER, ROBERT D  
Address: 59 KENILWORTH ROAD  
City-St-Zip: RYE, NY 10580

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: MILLER-ROSENBERG, AMY R  
Address: 59 KENILWORTH ROAD  
City-St-Zip: RYE, NY 10580

Title: S (X) Change ( ) Addition  
Name: COBY, SUSAN J  
Address: 103 OLD ORCHARD ROAD  
City-St-Zip: RYE BROOK, NY 10573

Title: T (X) Change ( ) Addition  
Name: MILLER, STEVEN E  
Address: 10 COUNTRY RIDGE DRIVE N.  
City-St-Zip: RYE BROOK, NY 10573

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEANNA MILLER

PRES

01/17/2005

Electronic Signature of Signing Officer or Director

Date