FILED
May 02, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000090945

1. Entity Name
M & L ENTERPRISES OF BREVARD, INC.

Principal Place of Business	Mailing Address
1520 BOTTLEBRUSH DRIVE 2-M PALM BAY, FL 32905 US	1520 BOTTLEBRUSH DRIVE 2-M PALM BAY, FL 32905 US

DO NOT WRITE IN THIS SPACE

01272005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3527259
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALICCHIA, DOMENIC H
1520 BOTTLEBRUSH DRIVE NE
PALM BAY, FL 32905

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (Must be Registered Agent's signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $350.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	POWELL, MICHAEL
STREET ADDRESS	1520 BOTTLE BRUSH DR NE
CITY-ST-ZIP	PALM BAY, FL 32905
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/05-80101-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: Michael W. Powell 4/29/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

Apr-29-05 08:00A