## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000094722

Entity Name: M & M SALES & SERVICES, INC.

FILED Jan 23, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10175 E. DEEP CREEK BLVD. 10175 E. DEEP CREEK BLVD. HASTING, FL 33214

HASTING, FL 32145

**Current Mailing Address: New Mailing Address:** 

10175 E. DEEP CREEK BLVD. 10175 E. DEEP CREEK BLVD.

HASTING, FL 33214 HASTING, FL 32145

FEI Number: 59-3577668 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

OSBURN, WILLIAM M OSBURN, WILLIAM M 10175 E. DEEP CREEK BLVD. 10175 E. DEEP CREEK BLVD. HASTING, FL 33214 HASTING, FL 32145

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: 01/23/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete OSBURN, WILLIAM M Name:

10175 E. DEEP CREEK BLVD. Address:

City-St-Zip: HASTING, FL 33214

Title: STD () Delete Name: MOORE, STEVEN L

10175 E. DEEP CREEK BLVD. Address:

HASTING, FL 33214 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

OSBURN, WILLIAM M Name: 10175 E. DEEP CREEK BLVD. Address:

City-St-Zip: HASTING, FL 32145

Title: STD (X) Change ( ) Addition

Name: MOORE, STEVEN L

Address: 10175 E. DEEP CREEK BLVD.

HASTING, FL 32145 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM M. OSBURN PD 01/23/2007