

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019499

Entity Name: M & O MANAGEMENT & INVESTMENTS, INC.

FILED  
Feb 20, 2004  
Secretary of State

## Current Principal Place of Business:

12195 S.W. 101 STREET  
MIAMI, FL 33186

## New Principal Place of Business:

12195 SW 101 STREET  
MIAMI, FL 33186

## Current Mailing Address:

12195 S.W. 101 STREET  
MIAMI, FL 33186

## New Mailing Address:

12195 SW 101 STREET  
MIAMI, FL 33186

FEI Number: 65-0902380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONCALVES, OLVAO  
12195 S.W. 101 STREET  
MIAMI, FL 33186

## Name and Address of New Registered Agent:

GONCALVES, OLVAO  
12195 SW 101 STREET  
MIAMI, FL 33186

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:

02/20/2004

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: GONCALVES, OLAVO  
Address: 12195 S.W. 101 STREET  
City-St-Zip: MIAMI, FL 33186

Title: SVD ( ) Delete  
Name: LABADY, MANUEL  
Address: 12195 S.W. 101 STREET  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: GONCALVES, OLAVO  
Address: 12195 SW 101 STREET  
City-St-Zip: MIAMI, FL 33186

Title: SVD (X) Change ( ) Addition  
Name: LABADY, MANUEL  
Address: 12195 SW 101 STREET  
City-St-Zip: MIAMI, FL 33186

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 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: OLAVO GONCALVES

P

02/20/2004

Electronic Signature of Signing Officer or Director

Date