

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006246

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: M & J INVESTMENTS OF MINNESOTA, INC.

**Current Principal Place of Business:**

4257 HAINES ROAD  
SUITE A  
DULUTH, MN 55811

**New Principal Place of Business:**

**Current Mailing Address:**

4257 HAINES ROAD  
SUITE A  
DULUTH, MN 55811

**New Mailing Address:**

FEI Number: 39-1713238      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOLDBERG, DAVID A  
5405 SW 25TH PLACE  
CAPE CORAL, FL 33914      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: CST ( ) Delete  
Name: GOLDBERG, DAVID ALLEN  
Address: 4257 HAINES ROAD, SUITE A  
City-St-Zip: DULUTH, MN 55811

Title: VCVP ( ) Delete  
Name: GOLDBERG, CHERYL B  
Address: 4257 HAINES ROAD, SUITE A  
City-St-Zip: DULUTH, MN 55811

Title: D ( ) Delete  
Name: GOLDBERG, DAVID DEAN  
Address: 4711 BAYCLIFFE DRIVE  
City-St-Zip: EXXCELSIOR, MN 55331

Title: D ( ) Delete  
Name: OGREN, MARK JOSEPH  
Address: 6076 SCENIC ROAD  
City-St-Zip: MINNETONKA, MN 55345

Title: D ( ) Delete  
Name: GOLDBERG, DARRELL GENE  
Address: 4978 MILLER TRUNK HWY.  
City-St-Zip: DULUTH, MN 55811

Title: D ( ) Delete  
Name: OGREN, LORI LYNN  
Address: 3400 AVE. OF THE ARTS #G214  
City-St-Zip: COSTA MESA, CA 92626

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

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

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

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

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

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

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 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: CHERYL B GOLDBERG

VICE

01/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date