

2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2008
Secretary of State**

DOCUMENT# P07000117456

Entity Name: HEAVENLY SWEETS, INC.

Current Principal Place of Business:

3979 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

3979 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMADE, TALAL
3979 CORAL TREE CIRCLE
COCONUT CREEK, FL 33073 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: D () Delete
Name: HAMADE, TALAL
Address: 3979 CORAL TREE CIRCLE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: ISSAM, EL DIMASI
Address: 3979 CORAL TREE CIRCLE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAMADE, TALAL
Address: 19280 CLOISTER LAKE LANE
City-St-Zip: BOCA RATON, FL 33498

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

I hereby certify that the information supplied with this filing does not qualify 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: TALAL HAMADE

D

04/30/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date