

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129494

Entity Name: MAMA'S BAKERY, INC.

FILED
Feb 14, 2008
Secretary of State

Current Principal Place of Business:

1200 S.W. 67TH AVENUE
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

1200 S.W. 67TH AVENUE
MIAMI, FL 33144

New Mailing Address:

FEI Number: 26-1536233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, ELLIOTT
111 S.W. 3RD STREET
6TH FLOOR
MIAMI, FL 33130 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: PD () Delete
Name: NODARSE, ORESTES
Address: 1200 S.W. 67TH AVENUE
City-St-Zip: MIAMI, FL 33144

Title: VSD () Delete
Name: VARGAS, CLAUDIYOLY
Address: 1200 S.W. 67TH AVENUE
City-St-Zip: MIAMI, FL 33144

Title: S () Delete
Name: HARRIS, ELLOITT ASST.
Address: 1200 S.W. 67TH AVENUE
City-St-Zip: MIAMI, FL 33144

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:

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: NODARSE, ORESTES

PD

02/14/2008

Electronic Signature of Signing Officer or Director

_____ Date