

2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 13, 2002 8:00 am Secretary of State

03-13-2002 90137 026 ***150.00

FILED

DOCUMENT # P98000097552

1. Entity Name AMY'S COOKIES, INC.

Principal Place of Business

501 B HWY 98E DESTIN FL 32541

Mailing Address

501 HWY.98.STE.B DESTIN FL 32541

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3546517

Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

HAUGHT, BRUCE A 36468 EMERALD COAST PRKWY SUITE 2101 DESTIN FL 32541

7. Name and Address of New Registered Agent

Name: Bruce A. Haught Street Address: 385 Highway 98, Suite 200 City: DESTIN FL Zip Code: 32541

8. 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

[Handwritten Signature]

2/28/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Table with 2 main columns: OFFICERS AND DIRECTORS (Block 11) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (Block 12). Each entry includes Title, Name, Street Address, and City-ST-ZIP.

13. 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature: Amy Yanora]

2/28/02

850-650-4487

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2E034 (9/01)