2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015788

Entity Name: MOM & POPS, INC.

FILED Apr 15, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1801 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

6939 DAWNTREE CT. 5576 MUIRFIELD VILLAGE CIRCLE LAKE WORTH, FL 33467 LAKE WORTH, FL 33463

FEI Number: 02-0549802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHENKMAN, KENNETH D
6939 DAWNTREE CT.
LAKE WORTH, FL 33467 US
SHENKMAN, KENNETH D
5576 MUIRFIELD VILLAGE CIRCLE
LAKE WORTH, FL 33463 US

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: 04/15/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SHENKMAN, KENNETH D SHENKMAN, KENNETH D Name: Name: 6939 DAWNTREE CT. 5576 MUIRFIELD VILLAGE CIRCLE Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SHENKMAN, BRIAN L
 Name:
 SHENKMAN, BRIAN L

 Address:
 6921 69TH WAY
 Address:
 13623 48TH COURT N

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete Title: D (X) Change () Addition Name: SHENKMAN, CAROLE Name: SHENKMAN, CAROLE

Address: 10550 PEBBLE COVE LANE Address: 10926 DOLPHIN PALM COURT #B City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOYNTON BEACH, FL 33437

Title: () Delete Title: (X) Change () Addition SHENKMAN, HOWARD SHENKMAN, HOWARD Name: Name: Address: 10550 PEBBLE COVE LANE Address: 10926 DOLPHIN PALM COURT N City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOYNTON BEACH, FL 33437

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: CAROLE SHENKMAN D 04/15/2006