2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006690

Entity Name: LITE COOKIES LIMITED, INC.

FILED Jul 02, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3700 J STREET DEMING, NM 88030

Current Mailing Address: New Mailing Address:

9422 NORTH US HWY #1 SEBASTIAN, FL 32958

FEI Number: 85-0373339 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:

FRY, SANDRA A 9422 NORTH U.S. HWY #1 SEBASTIAN, FL 32958 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM () Delete Title: CHRM (X) Change () Addition SEMPREUIVO, JOSEPH A SEMPREVIVO, JOSEPH A Name: Name: 9422 NORTH HWY US 1 9422 NORTH HWY US 1 Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958

Title: P () Delete Title: P (X) Change () Addition Name: SEMPREUIVO, JOSEPH A SEMPREVIVO, JOSEPH A

 Name:
 SEMPREUIVO, JOSEPH A
 Name:
 SEMPREVIVO, JOSEPH A

 Address:
 9422 NORTH HWY US 1
 Address:
 9422 NORTH HWY US 1

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:
 SEBASTIAN, FL 32958

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

 Name:
 SEMPREUIVO, JO MARIE
 Name:
 SEMPREVIVO, JO MARIE

 Address:
 9422 NORTH HWY US 1
 Address:
 9422 NORTH HWY US 1

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:
 SEBASTIAN, FL 32958

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: JOSEPH A. SEMPREVIVO CHRM 07/02/2007