

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K88148

FILED  
Aug 19, 2008  
Secretary of State

Entity Name: MAMA MIA'S ITALIAN ICES INC.

## Current Principal Place of Business:

3059 N.W. 28TH STREET  
LAUDERDALE LAKES, FL 33311 US

## New Principal Place of Business:

14631 SW 16 STREET  
DAVIE, FL 33325 US

## Current Mailing Address:

3059 N.W. 28TH STREET  
LAUDERDALE LAKES, FL 33311 US

## New Mailing Address:

14631 SW 16 STREET  
DAVIE, FL 33325 US

FEI Number: 65-0140520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICRESCENZO, ANGELA  
3170 N. FEDERAL HWY  
#103 C  
LIGHTHOUSE POINT, FL 33064 US

## Name and Address of New Registered Agent:

MERKIN, STEWART A ESQ  
444 BRICKELL AVE.  
STE. 300  
MIAMI, FL 33131 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: STEWART A. MERKIN, ESQ.

08/19/2008

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:

Title: S ( ) Delete  
Name: LIND, STUART,  
Address: 3059 N.W. 28TH STREET  
City-St-Zip: LAUDERDALE LAKES, FL

Title: P ( ) Delete  
Name: GULOTTA, FRANK,  
Address: 3059 N.W. 28TH STREET  
City-St-Zip: LAUDERDALE LAKES, FL

Title: D (X) Delete  
Name: GULOTTA, JENNIFER  
Address: 1108 HIGHLAND BEACH DR., #1  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D (X) Delete  
Name: LEMMEMMAN, MICHAEL  
Address: 3059 N.W. 28TH ST.  
City-St-Zip: LAUDERDALE LAKES, FL 33311

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEMMERMAN, MICHAEL  
Address: 14631 SW 16 ST  
City-St-Zip: DAVIE, FL 33325

Title: S (X) Change ( ) Addition  
Name: LIND, STUART  
Address: 14631 SW 16 ST  
City-St-Zip: DAVIE, FL 33325

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: MICHAEL LEMMERMAN

P

08/19/2008

Electronic Signature of Signing Officer or Director

Date