

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L09382

Entity Name: M & L COOKIES, INC.

FILED
Apr 25, 2004
Secretary of State

Current Principal Place of Business:

123 MILL BRANCH ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

123 MILL BRANCH ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-2963949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETRIZZO, WILLIAM C.
123 MILL BRANCH ROAD
TALLAHASSEE, FL 32312

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: P () Delete
Name: TROZZO, JOSEPH
Address: 359 BURUM ST
City-St-Zip: PELLAN, GA 31779

Title: VTM () Delete
Name: TROZZO, SHARON J.
Address: 359 NURUM ST
City-St-Zip: PELHAM, GA 31779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TROZZO, JOSEPH
Address: 7616 HWY. 112 N.
City-St-Zip: CAMILLA, GA 31730 US

Title: VTM (X) Change () Addition
Name: TROZZO, SHARON J.
Address: 7616 HWY. 112 N.
City-St-Zip: CAMILLA, GA 31730 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 TROZZO

P

04/25/2004

Electronic Signature of Signing Officer or Director

_____ Date