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FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L64795 (2)  
1. Corporation Name  
MAMA MAE'S, INC.

Principal Place of Business Mailing Address  
19651 BRUCE B DOWNS BLVD #B2 19651 BRUCE B DOWNS BLVD #B2  
#48 #48  
TAMPA FL 33647 TAMPA FL 33647

DO NOT WRITE IN THIS SPACE

|                                |  |                        |  |  |  |
|--------------------------------|--|------------------------|--|--|--|
| 2. Principal Place of Business |  | 2a. Mailing Address    |  | 3. Date Incorporated or Qualified  |  |
| 21 Suite, Apt. #, etc.         |  | 26 Suite, Apt. #, etc. |  | 04/12/1990   |  |
| 22 City & State                |  | 27 City & State        |  | 4. FEI Number  |  |
| 23 Zip                         |  | 28 Zip                 |  | 59-3012696   |  |
| 24 Country                     |  | 29 Country             |  | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required   |  |
|                                |  |                        |  | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees  |  |
|                                |  |                        |  | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STONEBRAKER, GREGORY J  
7169 N SERENOA DR  
SARASOTA FL 34241

|   |
|---|
| 81 Name   |
| 82 Street Address (P.O. Box Number is Not Acceptable) |
| 83  |
| 84 City   |
| FL 85 Zip Code  |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent Signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                            |                        |   |                         |
|----------------------------|------------------------|---|-------------------------|
| 12. OFFICERS AND DIRECTORS |                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                         |
| TITLE                      | P                      | 1.1 TITLE   | P.                      |
| NAME                       | BUFF, PAUL R           | 1.2 NAME  | STONEBRAKER, GREGORY J  |
| STREET ADDRESS             | 38038 LAWANDA LOOP     | 1.3 STREET ADDRESS                                    | 7169 N. SERENOA DR      |
| CITY-ST-ZIP                | ZEPHYRHILLS FL         | 1.4 CITY-ST-ZIP                                       | SARASOTA, FL 34241      |
| TITLE                      | S                      | 2.1 TITLE   | V                       |
| NAME                       | BUFF, JOYCE H.         | 2.2 NAME  | STONEBRAKER, SHERRY L   |
| STREET ADDRESS             | 38038 LAWANDA LOOP     | 2.3 STREET ADDRESS                                    | 7169 N. SERENOA DR.     |
| CITY-ST-ZIP                | ZEPHYRHILLS FL         | 2.4 CITY-ST-ZIP                                       | SARASOTA, FL 34241      |
| TITLE                      | OC                     | 3.1 TITLE   | S                       |
| NAME                       | STONEBRAKER, GREGORY J | 3.2 NAME  | STONEBRAKER, SHERRY L.  |
| STREET ADDRESS             | 7169 N SERENOA DR      | 3.3 STREET ADDRESS                                    | 7169 N. SERENOA DR.     |
| CITY-ST-ZIP                | SARASOTA FL            | 3.4 CITY-ST-ZIP                                       | SARASOTA, FL 34241      |
| TITLE                      | T                      | 4.1 TITLE   | T.                      |
| NAME                       | STONEBRAKER, SHERRY L. | 4.2 NAME  | STONEBRAKER, GREGORY J. |
| STREET ADDRESS             | 7169 N SERENOA DR      | 4.3 STREET ADDRESS                                    | 7169 N. SERENOA DR      |
| CITY-ST-ZIP                | SARASOTA FL            | 4.4 CITY-ST-ZIP                                       | SARASOTA, FL 34241      |
| TITLE                      |                        | 5.1 TITLE   |                         |
| NAME                       |                        | 5.2 NAME  |                         |
| STREET ADDRESS             |                        | 5.3 STREET ADDRESS                                    |                         |
| CITY-ST-ZIP                |                        | 5.4 CITY-ST-ZIP                                       |                         |
| TITLE                      |                        | 6.1 TITLE   |                         |
| NAME                       |                        | 6.2 NAME  |                         |
| STREET ADDRESS             |                        | 6.3 STREET ADDRESS                                    |                         |
| CITY-ST-ZIP                |                        | 6.4 CITY-ST-ZIP                                       |                         |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

GREGORY J. STONEBRAKER

941-283-8054

CR2E034 (10/97)