

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M29270

Entity Name: MAMA'S KITCHEN, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

C/O VINCENT DISISTO
13844 ELDER CRT.
WELLINGTON, FL 33414

New Principal Place of Business:

C/O VINCENT DISISTO
6763 W CALUMET CIR
LAKE WORTH, FL 33467

Current Mailing Address:

C/O VINCENT DISISTO
13844 ELDER CRT.
WELLINGTON, FL 33414

New Mailing Address:

C/O VINCENT DISISTO
6763 W CALUMET CIR
LAKE WORTH, FL 33467

FEI Number: 65-0488874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DISISTO, VINCENT
7478 LAKE WORTH ROAD
LAKE WORTH, FL 33467 US

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: DISISTO, MARIA
Address: 7478 LAKEWORTH RD
City-St-Zip: LAKE WORTH, FL 33467

Title: V () Delete
Name: COOK, ANDREW
Address: 7478 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL 33467

Title: ST () Delete
Name: DISISTO, YOLANDA
Address: 7478 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: COOK, YOLANDA
Address: 7478 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL 33467

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: YOLANDA COOK

ST

01/28/2009

Electronic Signature of Signing Officer or Director

_____ Date