2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006833

Title:

Name:

Address: City-St-Zip:

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FILED May 01, 2009 Secretary of State

Entity Name: MUD COOKIES NO MORE, INC. **Current Principal Place of Business: New Principal Place of Business:** 20458 OLD CUTLER ROAD, SUITE 114 CUTLER BAY, FL 33189 **Current Mailing Address: New Mailing Address:** 20458 OLD CUTLER ROAD, SUITE 114 CUTLER BAY, FL 33189 FEI Number: 26-3030265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FRANCIS, SANDRA Name: Name: 20458 OLD CUTLER ROAD, SUITE 114 Address: Address: City-St-Zip: CUTLER BAY, FL 33189 City-St-Zip: Title: DS Title: () Delete () Change () Addition Name: AIME, MAGDA Name: Address: 20458 OLD CUTLER ROAD, SUITE 114 Address: City-St-Zip: CUTLER BAY, FL 33189 City-St-Zip: Title: () Delete Title: () Change () Addition NICOLEAU, JOHANNE Name: Name: 20458 OLD CUTLER ROAD, SUITE 114 Address: Address: City-St-Zip: CUTLER BAY, FL 33189 City-St-Zip: Title: DT () Delete Title: () Change () Addition NICOLEAU, MARIO Name: Name: 20458 OLD CUTLER ROAD, SUITE 114 Address: Address: City-St-Zip: CUTLER BAY, FL 33189 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GEORGES FRANCIS PRES 05/01/2009

() Delete

20458 OLD CUTLER ROAD, SUITE 114

FRANCIS, GEORGES

CUTLER BAY, FL 33189

() Change () Addition