

2004 FOR PROFIT CORPORATION ANNUAL REPORT

PS 1 & 2

DOCUMENT # P00000003386 1. Entity Name M & M ICE CREAM V, INC.						FILED SECRETARY OF STATE DIVISION OF CORPORATION 04 JUL 12 AM 8:11	
Principal Place of Business 2601 PRESTON RD 2240 FRISCO, TX 75034				Mailing Address 132 10TH AVE N 103 SAFETY HARBOR, FL 34695			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip				3. Mailing Address 12350 Belcher Rd S 13-B Largo FL 33773 Suite, Apt. #, etc. City & State Zip			
Country USA				4. FEI Number 59-3629186		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required		04272004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent MANELLA, FRANK 755 ISLAND WAY CLEARWATER, FL 33767				7. Name and Address of New Registered Agent Name Larry Crowley Street Address (P.O. Box Number is Not Acceptable) 12350 Belcher Rd S 13-B City Largo State FL Zip Code 33773			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP PSTD MANELLA, FRANK 755 ISLAND WAY CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP PSTD Larry Crowley 12350 Belcher Rd S 13-B Largo FL 33773 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP PSTD Larry Crowley <input type="checkbox"/> Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition			
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: DATE: _____ DAYTIME PHONE #: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							

TR



M & M Ice Cream V, Inc.
12350 Belcher Rd S 13-B
Largo, FL 33773
(727) 524-1126

July 9, 2004

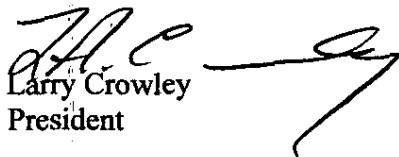
Florida Dept. of Revenue
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We received a Notice of Intent to Dissolve for the above company, copy enclosed. We filed our report along with our check for \$150 on April 27, 2004. Since the check had cleared, I contacted your office via email to inquire. I was told the report was rejected because it was lacking a signature and that we were sent a letter. Since the letter was obviously lost somewhere, possibly sent to our old address, I am forwarding a signed copy of our report.

Please let me know if we need to do anything further. Thank you for your attention.

Sincerely,


Larry Crowley
President