2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# P01000107262

Entity Name: YUMMY TREATS INC.

Current Principal Place of Business:

2124 N. FLAMINGOLD
PENBROKE PINES, FL 33028

New Principal Place of Business:

2124 N. FLAMINGO ROAD
PENBROKE PINES, FL 33028

Current Mailing Address:

948 CRESTVIEW CIRCLE
WESTON, FL 33327

New Mailing Address:

FEI Number: 03-0385341 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLEEKOP, EVELYN
948 CRESTVIEW CIRCLE
WESTON, FL 33327 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: PD ( ) Delete
Name: FLEEKOP, EVELYN
Address: 948 CRESTVIEW CIRCLE
City-St-Zip: WESTON, FL 33327

Title: V ( ) Delete
Name: FLEEKOP, DAVID
Address: 948 CRESTVIEW CIRCLE
City-St-Zip: WESTON, FL 33327

Title: S ( ) Delete
Name: FLEEKOP, MICHELLE
Address: 948 CRESTVIEW CIRCLE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: EVELYN FLEEKOP PD 04/20/2005

Electronic Signature of Signing Officer or Director Date