2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058792

Entity Name: JUST LIKE MOM'S, INC.

City-St-Zip: FORT LAUDERDALE, FL 33309

FILED Apr 15, 2009 Secretary of State

| Elluty Na | ille: JUST Lir | KE MOM 5, INC. | | | |
|---|--------------------------------------|---------------------------------|---|--|--|
| Current P | rincipal Place | e of Business: | New Principal Place of | New Principal Place of Business: | |
| | 30TH AVE JDERDALE, F | L 33309 | | | |
| Current N | lailing Addre | ss: | New Mailing Address | New Mailing Address: | |
| 6992 NW 30TH AVE FORT LAUDERDALE, FL 33309 | | | 6992 NW 30TH AVE FORT LAUDERDALE, FL 33309 | | |
| FEI Number | : 30-0090852 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| SUNRISE, | / 54 STREET \$, FL 33351 | US | | | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electro | nic Signature of Registered Aલ્ | gent | Date | |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | LIVINGSTON, I 6992 NW 30TH | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D (LIVINGSTON, (6992 NW 30TH | | Title: Name: Address: | () Change () Addition | |

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINGER LIVINGSTON D 04/15/2009