

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000040046

Entity Name: MOM'S FINGER LICKIN, INC.

FILED
Nov 08, 2005
Secretary of State

Current Principal Place of Business:

6702 INWOOD AVE
NORTH LAUDERDALE, FL 33068 US

New Principal Place of Business:

Current Mailing Address:

6702 INWOOD AVE
NORTH LAUDERDALE, FL 33068 US

New Mailing Address:

FEI Number: 20-0819512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, FINLEY
6702 INWOOD AVE
NORTH LAUDERDALE, FL 33068 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: FINLEY MATTHEWS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: MATTHEWS, FINLEY
Address: 6702 INWOOD AVE
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FINLEY MATTHEWS

Electronic Signature of Signing Officer or Director

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11/08/2005

Date