2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000132184

Entity Name: DAMN MAMA RESTAURANT, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14675 N.E. 6 AVE APT. 133 3125 S.W. 55TH AVE

NORTH MIAMI, FL 33161 PEMBROKE PARK, FL 33023

Current Mailing Address: New Mailing Address:

14675 N.E. 6 AVE APT. 133 3125 S.W. 55TH AVE

NORTH MIAMI, FL 33161 PEMBROKE PARK, FL 33023

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAINT GERARD, PATRICIA ST. GERARD, PATRICIA M 14675 N.E. 6 AVE APT. 133 3125 S.W. 55TH AVE

NORTH MIAMI, FL 33161 US PEMBROKE PARK, FL 33023 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: PATRICIA ST.GERARD 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 SAINT GERARD, PATRICIA
 Name:
 ST. GERARD, PATRICIA M

 Address:
 14675 N.E. 6 AVE APT. 133
 Address:
 3125 S.W. 55TH AVE

City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip: PEMBROKE PARK, FL 33023

Title: VP () Delete Title: VP (X) Change () Addition Name: BERNARD, JAMES Name: AUGUSTE, NELLIE M

Address: 1805 SANS SOUCI BLVD Address: 573 S.W. 10TH AVE
City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip: BELLE GLADE, FL 33430

Title: D () Delete Title: () Change () Addition

 Name:
 PIERRE, KERLYNE
 Name:

 Address:
 19760 N.E. 10TH AVENUE
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name:AUGUSTE, NELLIEName:ST. GERARD, BRANDON RAddress:573 S.W. 10TH STREETAddress:573 S.W. 10TH STREETCity-St-Zip:BELLE GLADE, FL 33430City-St-Zip:BELLE GLADE, FL 33430

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA ST. GERARD P 04/26/2007