2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159975

Entity Name: MOMMY, ME & MORE, INC.

FILED Apr 30, 2007 Secretary of State

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

14529 BRUCE B. DOWNS BOULEVARD 7928 GUNN HWY. TAMPA, FL 33613 TAMPA, FL 33626

Current Mailing Address: New Mailing Address:

14529 BRUCE B. DOWNS BOULEVARD
TAMPA, FL 33613

18701 LIVINGSTON AVENUE
LUTZ, FL 33559

FEI Number: 14-1947325 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:

DIAZ, STEPHANIE J
14529 BRUCE B. DOWNS BOULEVARD
TAMPA, FL 33613 US
DIAZ, STEPHANIE J
18701 LIVINGSTON AVENUE
LUTZ, FL 33559 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: 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

Address:

Title: DP (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D () Delete Title: DP (X) Change () Addition
DIAZ, STEPHANIE J Name: DIAZ, STEPHANIE J
14529 BRUCE B. DOWNS BOULEVARD Address: 18701 LIVINGSTON AVENUE

City-St-Zip: TAMPA, FL 33613 City-St-Zip: LUTZ, FL 33559

Title: D () Delete Title: DV (X) Change () Addition Name: DIAZ, EDWARD R Name: DIAZ, EDWARD R

Address: 14529 BRUCE B. DOWNS BOULEVARD Address: 18701 LIVINGSTON AVENUE

City-St-Zip: TAMPA, FL 33613 City-St-Zip: LUTZ, FL 33559

Name: DIAZ, DIANE Name: DIAZ, DIANE

Address: 14529 BRUCE B. DOWNS BOULEVARD Address: 18701 LIVINGSTON AVENUE

City-St-Zip: TAMPA, FL 33613 City-St-Zip: LUTZ, FL 33559

Title: () Delete Title: (X) Change () Addition KOZLOWSKI-LOCASCIO, DONNA KOZLOWSKI-LOCASCIO, DONNA Name: Name: Address: 14529 BRUCE B. DOWNS BOULEVARD Address: 103 CRESTWOOD City-St-Zip: TAMPA, FL 33613 City-St-Zip: SAFETY HARBOR, FL 34695

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: STEPHANIE J. DIAZ DP 04/30/2007