2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041329

Entity Name: SOO GOOD ICE CREAM, INC.

FILED Mar 21, 2007 Secretary of State

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

2330 NORTH WICKHAM ROAD SUITE 16 MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

2330 NORTH WICKHAM ROAD SUITE 16 MELBOURNE, FL 32935

FEI Number: 68-0625441 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:

ARNOLD, DONALD D

3106 HUNTLEIGH WAY

MELBOURNE, FL 32934 US

JOYALLE, BRIAN
739 ORANGE BLOSSOM DRIVE
MELBOURNE, FL 32935 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: BRIAN JOYALLE 03/21/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PTD (X) Change () Addition Name: ARNOLD, DONALD D Name: JOYALLE, BRIAN

Address: 3106 HUNTLEIGH WAY Address: 739 ORANGE BLOSSOM DRIVE
City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete Title: VSD (X) Change () Addition Name: ARNOLD, LINDA Name: JOYALLE, DAWN

Address: 3106 HUNTLEIGH WAY Address: 739 ORANGE BLOSSOM DRIVE City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: MELBOURNE, FL 32935

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

 Name:
 JOYALLE, BRIAN
 Name:

 Address:
 739 ORANGE BLOSSOM DRIVE
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

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

 Name:
 JOYALLE, DÀWN
 Name:

 Address:
 739 ORANGE BLOSSOM DRIVE
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

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: BRIAN JOYALLE PTD 03/21/2007