2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000080170

1. Entity Name MRS.SNOWBALL, INC.



FILED Aug 29, 2008 8:00 am Secretary of State

08-29-2008 90002 042 ***158.75

					NO.	23/									
Principal Plac 809 E. BLOO BRANDON, Fi	MINGDALE,		Mailing Address 809 E. BLOOMINGDALE, STE.#127 BRANDON, FL 33511			-	l 1 18 71	SRI IN GI	r es (T3) (arm rum	691H 61	RENT FEIRE N	1 P1 P1 P1 P1 P1 P1 P	II S BI11	IDI N BID
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Mailing Address												
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				082220	80	Ch	g-P		CR2E	034 (12/0	06)	
City & State			City & State				4. FEI No	umber	76	205	57				lied For
Zip Country			Zip	Zip Count			5. Certifi						\$8.75 Fee Req	Addit	,,, , , , , ,
	6. Name	and Address of Current R	egistered Agent	<u> </u>	j		7. Name	and A	ddres	s of Nev	w Reg	istered	Agent		
					Name										
SINGREEN, HELEN 809 E. BLOOMINGDALE, STE. 127 BRANDON, FL 33511						Street Address (P.O. 8ox Number is Not Acceptable)									
					City							Fl	FL Zip Code		
	named entit ions of regist	y submits this statement for ered agent.	the purpose of changing its	registere	ed office or r	egister	ed agent, o	or both	, in the	State of	Floric	da. Iam	familiar v	vith, a	nd accept
SIGNATURE_	Signature, typed	or printed harne of registered agent an	d title if applicable. (NOT	E: Registere	d Agent signature	e required	when reinstatin	ng)			<u>-</u> -	DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 9. Election Campaign Finan Trust Fund Contribution.							00 May Bed to Fees	e	In acc	ordanc ration d	e wit lid no	h s. 60' t recen	7.193(2) re the pr	(b), F	.S., the otice.
10.	, _	OFFICERS AND D	IRECTORS	11.			ADDITIO	DNS/C	HANG	ES TO O	FFICE	ERS AN	DIRECT	ORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	809 E. BL	IN, HELEN OOMINGDALE, STE. 12 N, FL 33511	☐ Delete	TITLE NAM STRE									☐ Chan	_	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		l l								☐ Char	ige	Addition

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 10 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Meles a Single Helen A. Singreen 08/25/08 (813) 4901

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