

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063590

Entity Name: YUM YUM CUPCAKE INC.

FILED
Mar 02, 2009
Secretary of State

Current Principal Place of Business:

7425 SABAL DRIVE
MIAMI LAKES, FL 33014

New Principal Place of Business:

7252 DADE PINE CT
MIAMI LAKES, FL 33014

Current Mailing Address:

7252 DADE PINE CT.
MIAMI LAKES, FL 33014

New Mailing Address:

7425 SABAL DR
MIAMI LAKES, FL 33014

FEI Number: 26-2907183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACERES, EVETTE
7425 SABAL DR
MIAMI LAKES, FL 33014 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, CRISTINA
Address: 7252 DADE PINE CT
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP () Delete
Name: CACERES, EVETTE
Address: 7425 SABAL DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

Title: S (X) Delete
Name: AGOSTINHO, TANIA
Address: 14399 SW 47TH ST
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CACERES, EVETTE
Address: 7425 SABAL DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP (X) Change () Addition
Name: COMPANIONI, LETICIA
Address: 7252 DADE PINE CT
City-St-Zip: MIAMI LAKES, FL 33014

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EVETTE CACERES

PRES

03/02/2009

Electronic Signature of Signing Officer or Director

Date