2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000017225

Entity Name: M & M DESSERTS, INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1998 NE SAN CARLOS CALLE 3072 NW FEDERAL HIGHWAY JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957

Current Mailing Address: New Mailing Address:

3072 NW FEDERAL HIGHWAY 1998 NE SAN CARLOS CALLE JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957

FEI Number: 65-0566377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOLICA, ANGELO T M & M DESSERTS INC. DBA HAAGEN-DAZS 1998 NÉ SAN CARLOS CALLE 3072 NW FEDERAL HIGHWAY JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957

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: ANGELO T. DOLICA 07/19/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSTD () Delete Title: (X) Change () Addition DOLICA, ANGELO T Name: CARECCIA, PAUL Name: 1986 NE SAN CARLOS CALLE Address: 3072 NW FEDERAL HIGHWAY Address:

City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: JENSEN BEACH, FL 34957

Title: () Delete Title: () Change (X) Addition CARECCIA, PAUL R Name: Name:

3072 NW FEDERAL HIGHWAY Address: Address: JENSEN BEACH, FL 34957 City-St-Zip:

City-St-Zip:

Title: Title: () Delete () Change (X) Addition DOLICA, ELIZABETH Name: Name:

3072 NW FEDERAL HIGHWAY Address Address: City-St-Zip: City-St-Zip: JENSEN BEACH, FL 34957

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

CARECCIA, LIZABETH Name: Name:

Address: Address: 3072 NW FEDERAL HIGHWAY City-St-Zip: City-St-Zip: JENSEN BEACH, FL 34957

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: LIZABETH CARECCIA S 07/19/2006