

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003514

Entity Name: UDDERLY DELICIOUS, INC.

FILED
Feb 14, 2005
Secretary of State

Current Principal Place of Business:

10261 STIRLING RD.
COOPER CITY, FL 33328

New Principal Place of Business:

Current Mailing Address:

5655 SW 192 WAY
FT LAUDERDALE, FL 33332

New Mailing Address:

FEI Number: 65-0727041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, WANDA
5655 SW 192 WAY
FT LAUDERDALE, FL 33332 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: D () Delete
Name: RIVERA, WANDA
Address: 5655 SW 192 WAY
City-St-Zip: FT LAUDERDALE, FL 33332

Title: D () Delete
Name: RIVERA, LENA
Address: 5655 SW 192 WAY
City-St-Zip: FT LAUDERDALE, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RIVERA, WANDA
Address: 5655 SW 192 WAY
City-St-Zip: FT LAUDERDALE, FL 33332

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WANDA RIVERA

PRES

02/14/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date