2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 18, 2007 08:00 Al Secretary of State DOCUMENT # P94000043926 1. Entity Name CRISCARY BAKERY, INC. Principal Place of Business Mailing Address 29359 SW 152ND AVENUE 29359 SW 152ND AVENUE LEISURE CITY, FL 33033 LEISURE CITY, FL 33033 01152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0500617 Not Applicable \$8.75 Additional 5: Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARBO, ROBERTO DO NOT WRITE 29441 SW 182ND AVENUE HOMESTEAD, FL 33030 IN THIS SPACE 8. The above named entity suffinits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida | I am familia the obligations of regis 000000713596 9. Election Campaign Financing \$5.00 May Be_ 04/26/07-80096-014 150.00 FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME CARBO, ROBERTO 29441 SW 182ND AVENUE STREET ADDRESS CITY-ST-ZIP HOMESTEAD, FL.33030 TITLE SD CARBO, MARIA NAME 29441 SW 182ND AVENUE STREET ADDRESS CITY-ST-ZIP HOMESTEAD, FL 33030 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

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changed, or on an attachn SIGNATURE:

12. 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 11 if