

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000005976

**Entity Name:** BAKERY EXPRESS OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1630 PRIME COURT  
SUITE 200  
ORLANDO, FL 32809

**Current Mailing Address:**

1630 PRIME COURT  
SUITE 200  
ORLANDO, FL 32809

**FEI Number:** 59-3369097

**Certificate of Status Desired:** No

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

REMSBERG, MICHAEL  
1630 PRIME CT.  
SUITE 200  
ORLANDO, FL 32809 US

*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

**Officer/Director Detail :**

Title D  
Name SERIO, ROBERT  
Address 1630 PRIME CT STE 200  
City-State-Zip: ORLANDO FL 32809

Title D  
Name BURMAN, CHARLES  
Address 1630 PRIME CT STE 200  
City-State-Zip: ORLANDO FL 32809

Title D  
Name WOLFE, RICHARD  
Address 1630 PRIME CT STE 200  
City-State-Zip: ORLANDO FL 32809

Title D  
Name WILLIAMS, THOMAS  
Address 1630 PRIME CT STE 200  
City-State-Zip: ORLANDO FL 32809

Title VP  
Name REMSBERG, MICHAEL E  
Address 1630 PRIME CT.  
200  
City-State-Zip: ORLANDO FL 32809

Title SECRETARY  
Name BAUM, JOHN  
Address 1630 PRIME COURT  
SUITE 200  
City-State-Zip: ORLANDO FL 32809

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL REMSBERG**

**RESIDENT AGENT**

**02/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date