

2021 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	CEO / 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

Title	TREASURER
Name	READE, MATTHEW
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**CEO****01/27/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date