200∜UNIFORM BUSINESS REPORT (UBR)

FILED Jan 31, 2001 8:00 am Secretary of State **DOCUMENT # 147617** 1. Entity Name PREMIER BAKING COMPANY, INCORPORATED 01-31-2001 90300 047 ***150.00 Principal Place of Business Mailing Address 1124 WEST GARDEN STREET 1124 WEST GARDEN STREET PENSACOLA FL 32501 PENSACOLA FL 32501 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0550376 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCOTTO, ANTHONY Street Address (P.O. Box Number is Not Acceptable) 1124 GHADEN ST. 2501 WHALEY ST. -PENSACOLA FL 32503 PENSALOLA, FL 32501 Zip Code FL 8. 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, Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Delete TITLE ☐ Change Addition TITLE SCOTTO, JAN NAME NAME STREET ADDRESS STREET ADDRESS 2501 WHALEY ST. 1124 GALDEN ST. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE NAME wedig, regina NAME 2501-N-WHALEY AVENUE 1124 GARDEN ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 32501 TITLE Change ☐ Addition TITLE NAME SCOTTO, ANTHONY S NAME 1124 GARDEN ST. STREET ADDRESS 2501 WHALEY STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP TITLE Change ☐ Addition NAME SCOTTO, ANTHONY J NAME STREET ADDRESS STREET ADDRESS 2501-N WHALEY 1124 GARDON CITY-ST-ZIP CITY-ST-ZIP 37501 PENSACOLA FL TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME BURKE, TONI M NAME 2501 N-WHALEY 1/24 GARDEN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA-FL 32501 TITLE Delete TITLE Change ☐ Addition

13. I hereby certify that the information supplied with this filling does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS CITY-ST-ZIP

NAME

STREET ADDRESS

25 JAN. 701 850 438-1263