2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 373197

FILED Jan 27, 2004 Secretary of State

Entity Name: A.B.C. BAKERIES SUPPLIES AND EQUIPMENT, INC

Current P	rincipal Place o	of Business:	New Principal Place	e of Business:
7200 NW MIAMI, FL				
Current N	lailing Address	:	New Mailing Addre	ss:
7200 NW MIAMI, FL				
FEI Number	: 59-1385511	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Cเ	rrent Registered Agent:	Name and Address	of New Registered Agent:
	ISRAEL A. 79 TERRACE 33143			
	e named entity su e of Florida.	bmits this statement for the p	urpose of changing its register	ed office or registered agent, or both,
SIGNATU	RE:			
SIGNATU		Signature of Registered Age	ent	Date
	Electronic	Signature of Registered Age	ent	Date
Election Ca	Electronic	Trust Fund Contribution ().		Date GES TO OFFICERS AND DIRECTORS:
Election Cal OFFICER Title: Name: Address:	Electronic	Trust Fund Contribution (). ORS: Delete L A., RACE		
Election Ca	Electronic mpaign Financing S AND DIRECT PD () I AGUILAR, ISRAE 7040 SW 79 TER MIAMI, FL 33143	Trust Fund Contribution (). ORS: Delete L A., RACE 3 Delete	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS:
Election Cal OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic mpaign Financing S AND DIRECT PD ()E AGUILAR, ISRAE 7040 SW 79 TER MIAMI, FL 33143 SD ()E TAMBINI, ANAT 6800 SW 63 STR MIAMI, FL 33143	Trust Fund Contribution (). ORS: Delete L A., RACE Belete CEET Belete M., URT	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS: () Change () Addition

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: ANA T TAMBINI SD 01/27/2004