

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

* PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90090 044 ***158.73

DOCUMENT # 542424

1. Corporation Name

FLOWERS BAKING CO. OF MIAMI, INC.

Principal Place of Business

17800 N. W. MIAMI COURT. N. DADE
MIAMI FL 33169

Mailing Address

17800 N. W. MIAMI COURT. N. DADE
MIAMI FL 33169

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/05/1977

4. FEI Number

59-1758784

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME DELEU, JOHN
STREET ADDRESS 17800 NW MIAMI COURT
CITY-ST-ZIP MIAMI FL 33169

TITLE VD ☒ DELETE
NAME ALDREDGE, KEITH
STREET ADDRESS 17800 N W MIAMI COURT
CITY-ST-ZIP MIAMI FL 33169

TITLE STD ☒ DELETE
NAME LOPEZ, FELIX
STREET ADDRESS 17800 NW MIAMI COURT
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE
NAME VARNEDOE, HEETH III
STREET ADDRESS US HIGHWAY 19 SOUTH
CITY-ST-ZIP THOMASVILLE GA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition
1.2 NAME CRAIG WHITE
1.3 STREET ADDRESS 17800 NW MIAMI COURT, MIAMI FL33169
1.4 CITY-ST-ZIP

2.1 TITLE VD ☐ Change ☒ Addition
2.2 NAME JOHN DELEU
2.3 STREET ADDRESS 17800 NW MIAMI COURT, MIAMI FL 33169
2.4 CITY-ST-ZIP

3.1 TITLE STD ☐ Change ☒ Addition
3.2 NAME DIANE WYLIE
3.3 STREET ADDRESS 17800 NW MIAMI COURT, MIAMI FL 33169
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-99

Date

(305) 652-3416

Daytime Phone #

CR2E034 (1/1/98)