

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588602

Entity Name: CASINO BAKERY, INC.

FILED  
Jul 27, 2007  
Secretary of State

## Current Principal Place of Business:

2726 36TH STREET  
TAMPA, FL 33605

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 5828  
TAMPA, FL 33675 US

## New Mailing Address:

1106 N. FRANKLIN STREET  
TAMPA, FL 33602 US

FEI Number: 59-1849497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, LOUIS, JR.  
2726 36TH STREET  
TAMPA, FL 33605 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SANCHEZ, LOUIS III,  
Address: 509 OAKHURST DR.  
City-St-Zip: BRANDON, FL 33511

Title: V ( ) Delete  
Name: SANCHEZ, LOUIS, JR.,  
Address: 509 OAKHURST DR.  
City-St-Zip: BRANDON, FL 33511

Title: S ( ) Delete  
Name: GOAN, IRIS TERES  
Address: 3204 W CLIFTON ST  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: GURMAN, LORI  
Address: 1228 ALPINE LAKE DR  
City-St-Zip: BRANDON, FL 33511

Title: T ( ) Delete  
Name: SANCHEZ, AMY  
Address: 509 OAK HURST DR  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LOUIS SANCHEZ, JR.

V

07/27/2007

Electronic Signature of Signing Officer or Director

Date