

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 637289

Entity Name: KALUPA'S BAKERY, INC.

FILED  
Sep 24, 2007  
Secretary of State

## Current Principal Place of Business:

2602 S. MAC DILL AVE  
TAMPA, FL 33629

## New Principal Place of Business:

## Current Mailing Address:

2602 S. MAC DILL AVE  
TAMPA, FL 33629

## New Mailing Address:

FEI Number: 59-1973358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BACCARELLA, DOMINIC  
4144 N. ARMENIA AVENUE  
STE 210  
TAMPA, FL 33607 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: BACCARELLA, DOMINIC

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: PD ( ) Delete  
Name: KALUPA, MICHAEL  
Address: 2602 S MACDILL AVE  
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete  
Name: BACCARELLA, DOMINIC, J.  
Address: 2602 S. MACDILL AVE  
City-St-Zip: TAMPA, FL 33629

Title: ST ( ) Delete  
Name: KALUPA, SUSAN T,  
Address: 2602 S MACDILL AVE  
City-St-Zip: TAMPA, FL 33629

## 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:

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: MICHAEL J. KALUPA

PRES

09/24/2007

Electronic Signature of Signing Officer or Director

Date