


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # F45845 1. Entity Name EAST BALT. BAKERY OF FLORIDA, INC.	
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Principal Place of Business 1801 WEST 31ST STREET CHICAGO, IL 60608	Mailing Address 1801 WEST 31ST STREET CHICAGO, IL 60608
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DO NOT WRITE IN THIS SPACE



04152005 No Chg-P CR2E034 (10/03)

4. FEI Number 36-3184006	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	COB KUCHURIS, FRANK L 1801 WEST 31ST STREET CHICAGO, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PETENES, JOHN 1801 WEST 31ST STREET CHICAGO, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVPC BOROWSKI, JOHN T. 1801 W. 31ST PLACE CHICAGO, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SRVP PAVISH, SUSAN 1801 WEST 31ST STREET CHICAGO, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HOMER, RICHARD 203 NORTH LASALLE STREET CHICAGO, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP QUEBNAU, WALTER 1801 W 31 ST CHICAGO, IL

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04/29/05-80072-018 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan E. Povich 4/18/05 773-3764444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #