

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

192

DOCUMENT # G16597

1. Entity Name

TRES MONITOS BAKERY, CORP.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 OCT 15 AM 8:00

Principal Place of Business

4552 WEST 12TH AVENUE  
HIALEAH FL 33012

Mailing Address

4552 WEST 12TH AVENUE  
HIALEAH FL 33012

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0434330

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARRERO, GLADYS  
4552 WEST 12TH AVENUE  
HIALEAH FL 33012

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
NAME MARRERO, GLADYS  
STREET ADDRESS 4552 WEST 12TH AVENUE  
CITY-ST-ZIP HIALEAH FL 33012

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME MARRERO, LEONARDO  
STREET ADDRESS 4320 SW 5 TERR  
CITY-ST-ZIP HIALEAH FL 33134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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: *Gladys Marrero*

GLADYS MARRERO-PRESIDENT

4/20/04 305-557-1870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

282

MIAMI, OCTOBER 1, 2004

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL.


DEAR SIR OR MADAM:

FOR YOUR INFORMATION I AM SENDING THE COPY OF MY UBR  
THAT I SENT TO YOUR DEPARTMENT ON 4/20/04, ALONG WITH  
A CHECK FOR THE AMOUNT OF \$150.00.

WE RECEIVED A NOTIFICATION THAT YOU DID NOT RECEIVE THE  
UBR AND THE CHECK. I CALLED THE DEPARTMENT OF STATE AND  
PER THE OFFICER INSTRUCTIONS, I AM SENDING THE COPY THAT  
I HAD IN MY FILES (ORIGINAL SIGNATURE) AND THE CHECK FOR  
THE AMOUNT OF \$150.00.

THANK YOU IN ADVANCE FOR YOUR COOPERATION IN THIS MATTER.

SINCERELY,



GLADYS MARRERO,  
PRESIDENT  
LOS TRES MONITOS BAKERY  
1005 SW 87TH AVE.  
MIAMI, FL. 33174

ENC.