

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # G 32575 1. Corporation Name International Breads Inc.			
Principal Place of Business Same		Mailing Address c/o Susanne Wilson 96 Glades Blvd #2 Naples, FL 33962	
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country		2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country	
21. Suite, Apt. #, etc. Same		26. Suite, Apt. #, etc. 96 Glades Blvd. Apt #2	
22. City & State Same		27. City & State Naples FL	
23. Zip 33962		28. Zip 33962	
24. Country Collier		29. Country Collier	
3. Date Incorporated or Qualified 4/11/1983		3a. Date of Last Report 5-1-95	
4. FEI Number 59-2295421		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 has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent Wilson, Susanne M. 96 Glades Blvd. Apt #2 Glades CC Naples, FL 33962		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number's Not Acceptable) N/A 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 _____ N/A			
12. OFFICERS AND DIRECTORS			
12.1 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
P/T Wilson, Susanne 96 Glades Blvd. Apt 2 Naples FL 33962			
12.2 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
V/S Cunard, Nancy J 96 Glades Blvd Apt #2 Naples FL 33962			
12.3 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.4 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.5 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.6 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.7 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.8 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.9 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
12.10 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP 13.5 TITLE ☐ Change ☐ Addition 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY - ST - ZIP 13.9 TITLE ☐ Change ☐ Addition 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY - ST - ZIP 13.13 TITLE ☐ Change ☐ Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY - ST - ZIP 13.17 TITLE ☐ Change ☐ Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY - ST - ZIP 13.21 TITLE ☐ Change ☐ Addition 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY - ST - ZIP 13.25 TITLE ☐ Change ☐ Addition 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY - ST - ZIP 13.29 TITLE ☐ Change ☐ Addition 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY - ST - ZIP 13.33 TITLE ☐ Change ☐ Addition 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY - ST - ZIP 13.37 TITLE ☐ Change ☐ Addition 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY - ST - ZIP 13.41 TITLE ☐ Change ☐ Addition 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY - ST - ZIP 13.45 TITLE ☐ Change ☐ Addition 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY - ST - ZIP 13.49 TITLE ☐ Change ☐ Addition 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY - ST - ZIP 13.53 TITLE ☐ Change ☐ Addition 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY - ST - ZIP 13.57 TITLE ☐ Change ☐ Addition 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY - ST - ZIP 13.61 TITLE ☐ Change ☐ Addition 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY - ST - ZIP 13.65 TITLE ☐ Change ☐ Addition 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY - ST - ZIP 13.69 TITLE ☐ Change ☐ Addition 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY - ST - ZIP 13.73 TITLE ☐ Change ☐ Addition 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY - ST - ZIP 13.77 TITLE ☐ Change ☐ Addition 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY - ST - ZIP 13.81 TITLE ☐ Change ☐ Addition 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY - ST - ZIP 13.85 TITLE ☐ Change ☐ Addition 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY - ST - ZIP 13.89 TITLE ☐ Change ☐ Addition 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY - ST - ZIP 13.93 TITLE ☐ Change ☐ Addition 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY - ST - ZIP 13.97 TITLE ☐ Change ☐ Addition 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY - ST - ZIP			
300001883833 -07/03/96--01077--039 ***200.00			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: _____ VP/S. 6-21-96 (941) 775- NANCY J. CUNARD SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2816			

CR2E034 (3/96)