

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H80232

Entity Name: TULIPAN BAKERY, INC.

FILED  
Jan 06, 2009  
Secretary of State

## Current Principal Place of Business:

% JOSE J. ALLIONE  
704 BELVEDERE RD  
WEST PALM BCH, FL 334051108

## New Principal Place of Business:

704 BELVEDERE RD  
WEST PALM BCH, FL 334051108

## Current Mailing Address:

% JOSE J. ALLIONE  
704 BELVEDERE RD  
WEST PALM BCH, FL 334051108

## New Mailing Address:

704 BELVEDERE RD  
WEST PALM BCH, FL 334051108

FEI Number: 59-2599573

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLIONE, JOSE J.  
704 BELVEDERE RD  
WEST PALM BCH, FL US

## Name and Address of New Registered Agent:

ALLIONE, JOSE J.  
704 BELVEDERE RD  
WEST PALM BCH, FL 33405 US

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: JOSE ALLIONE

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ALLIONE, JOSE J.,  
Address: 23-87 GABRIEL LN  
City-St-Zip: W PALM BEACH, FL

Title: S ( ) Delete  
Name: KINGSBURY, CYNTHIA  
Address: 3436 TACONIC DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP ( ) Delete  
Name: ALLIONE, STELLA  
Address: 2387 GABRIEL LANE  
City-St-Zip: WEST PALM BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ALLIONE, JOSE J.,  
Address: 2387 GABRIEL LN  
City-St-Zip: W PALM BEACH, FL 33406

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: JOSE ALLIONE

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date