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FILED

Apr 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K53035

(7)

1. Corporation Name  
ROYAL BAKERY, INC.

Principal Place of Business

5631 S. ORANGE AVE.  
ORLANDO FL 32809

Mailing Address

5631 S. ORANGE AVE.  
ORLANDO FL 32809-4269



2. Principal Place of Business

21 1475 PINE AVE.

Suite, Apt. #, etc.

22 City & State

23 ORLANDO, FL

24 Zip

32824

Country

25 ORANGE

2a. Mailing Address

26 1475 PINE AVE

Suite, Apt. #, etc.

27 City & State

28 ORLANDO, FL

Zip

32824

Country

30 ORANGE

3. Date Incorporated or Qualified

12/21/1988

3a. Date of Last Report

02/23/1996

4. FEI Number

65-0098303

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

JOHANNESSEN, BJORN  
5631 S. ORANGE AVE.  
ORLANDO FL 32809

10. Name and Address of New Registered Agent

81 Name BJORN JOHANNESSEN

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

1475 PINE AVE.

83

84 City ORLANDO

FL

85 Zip Code 32824

11. Pursuant to the provisions of Sections 607.0702 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

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

BJORN JOHANNESSEN

4/5/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CPTS ☐ DELETE

NAME JOHANNESSEN, BJORN

STREET ADDRESS 5631 S. ORANGE AVE.

CITY- ST- ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME JOHANNESSEN, TERESA

STREET ADDRESS 5631 S. ORANGE AVE.

CITY- ST- ZIP ORLANDO FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BJORN JOHANNESSEN

4/5/97 (407) 855 3172

CR2E034 (9/96)