

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019044

FILED
May 13, 2010
Secretary of State

Entity Name: FILLED BAGEL INDUSTRIES, LLC

Current Principal Place of Business:

11800 NW 102 ROAD
SUITE 6
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

11800 NW 102 ROAD
SUITE 6
MIAMI, FL 33178

New Mailing Address:

FEI Number: 04-3716995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SCHWARTZBERG, TROY A
11800 NW 102 ROAD
SUITE 6
MIAMI, FL 33178 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HARLAN BAKERIES INC
Address: 7597 E US HIGHWAY 36
City-St-Zip: AVON, IN 461237171 US

Title: MGRM
Name: SCHWARTZBERG, GARY J MGRM
Address: 11800 NW 102 ROAD, SUITE 6
City-St-Zip: MEDLEY, FL 33178 US

Title: MGRM
Name: EBERTS, EDWARD MGRM
Address: 5992 NW 77 DRIVE
City-St-Zip: PARKLAND, FL 33067 US

Title: MGRM
Name: LINCOLN FINANCIAL GROUP, LLC
Address: SEVEN FANEUIL MARKETPLACE
City-St-Zip: BOSTON, MA 02109 US

Title: MEME
Name: LINCOLN FINANCIAL GROUP TRUST
Address: 5613 NW 39 AVENUE
City-St-Zip: BOCA RATON, FL 33496 US

Title: MEMB
Name: LINCOLN FINANCIAL GROUP TRUST II
Address: 5613 NW 39 AVENUE
City-St-Zip: BOCA RATON, FL 33496 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GARY J SCHWARTZBERG

MGMM

05/13/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date