

2007 ANNUAL REPORT

FILED
May 10, 2007 8:00 am
Secretary of State

05-10-2007 90422 008 ****50.00

DOCUMENT # L06000087921

1. Entity Name
 THE HEAVENS BREAD, LLC



Principal Place of Business Mailing Address
 12701 S. John Young Parkway 12701 S. John Young Parkway
 Suite 107 Suite 107
 ORLANDO, FL 32837 ORLANDO, FL 32837



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 12701 S. John Young Pkwy. 12701 S. John Young Parkway
 Suite Apt. #, etc. Suite Apt. #, etc.
 #107 #107
 City & State City & State
 ORLANDO, FL ORLANDO, FL
 Zip Zip Country Country
 32837 32837 U.S.A. U.S.A.

05012007 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
 20-5532907 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 OSWALDO PEREZ
 11075 PRAIRIE HAWK DR
 ORLANDO, FL 32837

7. Name and Address of New Registered Agent
 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 the registered agent.

SIGNATURE 05/01/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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 NAME STREET ADDRESS CITY-STATE-ZIP	D SALOMON INVESTMENTS, LLC ☐ Delete 11075 PRAIRIE HAWK DR. ORLANDO, FL 32837	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DMCCY, INC ☐ Delete 1816 ABBOTS HILL DR. ORLANDO, FL 32835	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D MOVIDE INVESTMENTS, INC ☐ Delete 600 W THACKER AV. SUITE A18 KISSIMMEE, FL 34741	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D NENE INVESTMENTS, LLC ☐ Delete 1018 EAST ROBINSON STREET ORLANDO, FL 32801	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Required

05/01/07 407-666-6471