


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 08:00 AM
Secretary of State

DOCUMENT # L10500 1. Entity Name ANDRE'S SWISS BAKERY AND PASTRY SHOP, INC.	
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Principal Place of Business 235 E COMMERCIAL BLVD., #2 LAUDERDALE BY THE SEA, FL 33308	Mailing Address 235 E COMMERCIAL BLVD., #2 LAUDERDALE BY THE SEA, FL 33308
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07052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0137760	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MODOUX, ANDRE 235 E COMMERCIAL BLVD., #2 LAUDERDALE BY THE SEA, FL 33308
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**DO NOT WRITE
IN THIS SPACE**

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 registered agent.

SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reappointing)	DATE
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**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MODOUX, ANDRE 6540 NE 21ST ROAD FT LAUDERDALE, FL 33308
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U00000164460
07/08/04-80009-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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: Andre Modoux President 7-5-04 954-938-0372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #