

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L94798

FILED
Feb 10, 2009
Secretary of State

Entity Name: FIVE STAR BAKERY, INC.

Current Principal Place of Business:

4272 N STATE RD 7
LAUDERDALE LAKES, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

4272 N STATE RD 7
LAUDERDALE LAKES, FL 33319 US

New Mailing Address:

FEI Number: 65-0215804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, BERNARD
8184 BUTLER GREENWOOD DRIVE
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, BERNARD,
Address: 8184 BUTLER GREENWOOD DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T () Delete
Name: PAULETTE DACRES,
Address: 4795 NW 4 STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MAXINE BROWN,
Address: 8184 BUTLERGREENWOOD DR
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: MAXINE BROWN

T

02/10/2009

Electronic Signature of Signing Officer or Director

Date