2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

00 JUN -8 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0003852 AF

DOCUMENT # L99000006575

1. Entity Name
HIGH-TECH BAKERY PRODUCTS, LLC

Principal Place of Business
1390 SOUTH DIXIE HWY. STE 1108
CORAL GABLES FL 33146

Mailing Address
1390 SOUTH DIXIE HWY. STE 1108
CORAL GABLES FL 33146-2936

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

DO NOT WRITE IN THIS SPACE

4. FEI Number ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
JOYCE, MICHAEL G
1390 SOUTH DIXIE HWY, STE 1108
CORAL GABLES FL 33146

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE	MEMBER	☑ Delete
NAME	Raymond Hernandez	
STREET ADDRESS		
CITY-ST-ZIP	Barcelona, Spain	
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		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. LEO BARAGE ADDITIONS / CHANGES

TITLE	Leo Barake, President MGMR	☐ Change ☐ Addition
NAME	7241 S.W. 168 Street	
STREET ADDRESS		
CITY-ST-ZIP	Miami Fla. 33157	
TITLE	Joan Baluja JOAN BALUFO	☐ Change ☐ Addition
NAME		
STREET ADDRESS	Barcelona Spain	
CITY-ST-ZIP		
TITLE	JOSE MIRO	☐ Change ☐ Addition
NAME		
STREET ADDRESS	Barcelona, Spain	
CITY-ST-ZIP		
TITLE	MICHAEL JOYCE	☐ Change ☐ Addition
NAME	1390 South Dixie Highway Suite 1108	
STREET ADDRESS		
CITY-ST-ZIP	Coral Gables, Florida 33146	
TITLE		☐ Change ☐ Addition
NAME	800003298158--3	
STREET ADDRESS	-06/21/00--01007--005	
CITY-ST-ZIP	*****55.00 *****55.00	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. 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 is true and accurate and that my 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: SIGNATURE REQUIRED — 10 March 2000 — 305-662-8481
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #

CR2E083 (9/99)