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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M24472** **(6)**

1. Corporation Name
GOLDEN CHANTILLY BAKERY, INC.

Principal Place of Business	Mailing Address
12618 S.W. 8TH STREET MIAMI FL 33184-1412	12618 S.W. 8TH STREET MIAMI FL 33184-1412

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/11/1985
3a. Date of Last Report: 06/28/1994

2. Principal Place of Business 21 1036 S.W. 1 ST.	2a. Mailing Address 26	4. FEI Number 59-2565485	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23 MIAMI FLORIDA.	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip / Country 24 33130 25 US.	Zip / Country 29 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ABESADA, PETER R. 6780 CORAL WAY FIRST FLOOR MIAMI FL 33155	81 Name: FLORIDA ANNUAL REPORT SERVICES INC. 82 Street Address (P.O. Box Number is Not Acceptable): 1036 S.W. 1 ST. 83 84 City: MIAMI FL 85 Zip Code: 33130

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: AMADA CANTERA LOPEZ, PRES. 4/9 J
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when mail/delivery) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	GONZALEZ, TERESITA	12 NAME	
STREET ADDRESS	5013 S.W. 144 COURT	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	SAN, MARIA J	22 NAME	
STREET ADDRESS	5013 SW 114TH CT.	23 STREET ADDRESS	800001475048
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	-05/04/95--01014--024
TITLE	ST	31 TITLE	****200.00 ☐ Change ****200.00 ☐ Addition
NAME	GONZALEZ, MIGUEL	32 NAME	
STREET ADDRESS	5013 SW 144 COURT	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	
TITLE	VS	41 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, MANUEL	42 NAME	
STREET ADDRESS	13292 NW 1ST TERR	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SEC T. 4/25
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #
MIGUEL GONZALEZ

0001818 CP