2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State
05-01-2001 90092 017 ***150.00

DOCUMENT # P00000031661

1. Entity Name
SIMPLY IRRESISTIBLE BAKED GOODS, INC.

Principal Place of Business	Mailing Address
886 FLORIDA AVE ORANGE CITY FL 32763	886 FLORIDA AVE ORANGE CITY FL 32763

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1890 Providence Blvd	1890 Providence Blvd
Suite, Apt. # etc.: Suite N	Suite, Apt. #, etc.: Suite N
City & State: Deltona, Florida	City & State: Deltona, FL
Zip: 32725 Country:	Zip: 32725 Country:

4. FEI Number: 59-3641588 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MERCADO, ELBA I
886 FLORIDA AVE
ORANGE CITY FL 32763

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
President	Elba I Mercado	886 Florida Ave	Orange City, FL 32763	☐ Delete
Vice-President	Saul A. Villafañe	886 Florida Ave	Orange City, FL 32763	☐ Delete
Vice-President	Angel M. Mercado	1890 Providence Blvd Ste N	Deltona, FL 32725	☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition

CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: x [signature] 4/25/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #