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(Business Entity Name)

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WHP

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LAS AMERICAS BAKERY of Coral Springs Inc.  
(Name of corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sylvia Sanchez.  
(Name of person)

LAS AMERICAS BAKERY of Coral Springs Inc.  
(Name of firm/company)

3231 N. State Rd 17  
(Address)

MARGATE FL 33063  
(City/state and zip code)

For further information concerning this matter, please call:

Sylvia Sanchez at ( 904 ) 917-0717  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: LAS AMERICAS BAKERY of Coral Springs, Inc.
2. The principal office address: 3231 N. State Rd 7 MARGATE, FL 33063
3. The mailing address (if different):

4. Date of incorporation/qualification: 02/08/2001 Document number: P01000015299

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

HAROLD A. Jimenez
5134 NW 27th
MARGATE, FL 33063

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SYLVIA SANCHEZ
22785 SW 66th Ave #204
Boca Raton, FL 33428

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature of officer or director]

Diego Jimenez President

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature of Registered Agent]

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Atlantic Bonding Co., Inc.
Bonds Thru
Expires: Feb 23, 2007
Commission #DD186741
Margaret J. Pasmun



\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

[Handwritten signature]