2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000018905

1. Entity Name
FLORIDA BAKERY MACHINERY CORP.

Principal Place of Business	Mailing Address
1272 OCEAN SHORE DRIVE ORMOND BEACH, FL 32176	43 SAN JOSE DR ORMOND BEACH, FL 32176

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03292006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3698264
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

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9. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature required when reinstating. DATE: Registered Agent signature required when reinstating.

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CORTESE, JOHN
STREET ADDRESS	1272 OCEAN SHORE DRIVE
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	VD
NAME	CORTESE, JANET
STREET ADDRESS	1272 OCEAN SHORE DRIVE
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	SD
NAME	CORTESE, SHIRLEY A
STREET ADDRESS	1272 OCEAN SHORE DRIVE
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	TD
NAME	WEBLEY, WILLIAM
STREET ADDRESS	1272 OCEAN SHORE DRIVE
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet Cortese Janet Cortese 4-5-06 386-441-0736
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #