

2004 FOR PROFIT CORPORATION REINSTATEMENT

10f2

DOCUMENT # P01000030943

1. Entity Name
NITIN BAKERY CORP.



FILED

04 OCT 25 AM 10: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
14233 NW 23 ST
PEMBROKE PINES, FL 33028

Mailing Address
14233 NW 23 ST
PEMBROKE PINES, FL 33028

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT
FEE Number
11-3694180

098 (6/04) 04

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLANDINO, JUAN J
14233 NW 23 ST
PEMBROKE PINES, FL 33028

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

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 \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PT
BLANDINO, JUAN J
14233 N W 23 ST
PEMBROKE PINES, FL 33028

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

12504 Pines BLVD.
PEMBROKE PINES FL 33027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VS
BLANDINO, IRMA G
14233 N W 23 ST
PEMBROKE PINES, FL 33028

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

12504 Pines BLVD.
PEMBROKE PINES FL 33027

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

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TITLE
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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: + La Jose Blad-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-22-04

Date

Daytime Phone #

6

12504 PINES BLVD
PEMBROKE PINES FL 33027
PHONE (954) 885-0461

2012

NITIN BAKERY CORP

October 13, 2004

Division Of Corporations
PO Box 6327
Tallahassee FL 32314

Re: P01000030943

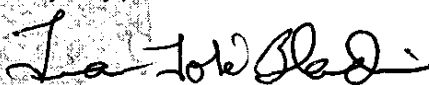
Dear Sirs:

Attached is our check for the 2004 Annual Report. We hereby request to be reinstated

due to the fact that we changed mailing address as corrected and never received our

Notification for Annual Report.

Very truly yours,


Juan J Blandino
President

