

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000044576

1. Entity Name
IMPERIAL BISCUIT INC.



Principal Place of Business
**12041 SW 40TH STREET
MIAMI, FL 33175-3535**

Mailing Address
**12041 SW 40TH STREET
MIAMI, FL 33175-3535**



01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1100675

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**VAZQUEZ, CARLOS M
12041 SW 40TH STREET
MIAMI, FL 33175-3535**

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IN THIS SPACE**

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 May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000142532
04/30/04-80055-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	VAZQUEZ, CARLOS M
STREET ADDRESS	12041 SW 40TH STREET
CITY-ST-ZIP	MIAMI, FL 331753535
TITLE	SD
NAME	VAZQUEZ, ALIDA
STREET ADDRESS	12041 SW 40TH STREET
CITY-ST-ZIP	MIAMI, FL 331753535
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: *Carlos M. Vazquez* **CARLOS M. VAZQUEZ** 04-27-04 (305) 635-1752
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #