2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State
02-10-2003 90397 044 ***150.00

DOCUMENT # P01000113677

1. Entity Name
DELAND BAKERY, INC.

Principal Place of Business	Mailing Address
128 N WOODLAND BLVD DELAND FL 32720	128 N WOODLAND BLVD DELAND FL 32720

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 22-3850093 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

AVILA, ALFREDO
2462 VAUGHN AVE
DELTONS FL 32725

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

SIGNATURE ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AVILA, ALFREDO 2462 VAUGHN AVE DELTONA FL 32725	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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: SIGNATURE REQUIRED 2-7-02 386-734-7553
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

EAST SUN ENTERPRISES, INC.

955A E ALTAMONTE DR.
ALTAMONTE SPRINGS, FL 32701

80025807

February 7, 2003

Florida Department of State
P.O.BOX 6327
Tallahassee, FL 32314

SUBJECT: 2002 ANNUAL REPORT

DOCUMENT NUMBER: P02000000459

Dear Sir or Madam,

We refer to the above matter. Please note that we have not received the 2002 annual report from you until we got the forward mail recently due to the change of our address. Our current business address is 955A E Altamonte Dr., Altamonte Springs, FL 32701 and mailing address is 321 S Northlake Blvd #2138, Altamonte Springs, FL 32701. Also, we have not received 2003 Uniform Business Report. Please mail the report to our current mailing address.

Enclosed please find the check of $150.00 for 2002 filing fees. It would be highly appreciated if you could kindly waive the penalty and correct your record.

Thank you.

Yours truly,

Ma, Jun /President