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CR2E034 (10/

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4370 S TAMIAMI TR, STE 105

SARASOTA FL 34231



FILED Jan 09, 2003 8:00 am **Secretary of State**

01-09-2003 90028 029 ***150.00

DOCUMENT # 1. Entity Name BREAD INVESTMENTS, INC.	P01000119211 c.	
Principal Place of Business	Mailing Address	

4370 S TAMIAMI TR. STE 105

SARASOTA FL 34231

2. Principal Place of Business Suite, Apt. # CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For 01-0628430 aras Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHEA, JOHN J 2940 S TAMIAMI TR, STE 105 SARASOTA FL 34239 8. The above named epity submits this harping its registered office or for the purpose of or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Regi Agent signature required when reinstating FILE NOW!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Change Addition PERREAULT, GEORGE NAME NAME 6101 MIDUIGHT PASS' RD. SARASOTA FI 3474 STREET ADDRESS 4970 S TAMIAMI TR, STE 105 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34231 SARASOTA City-St-7IP TITLE ecretary ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS 6101 MIDNIGHT PASS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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

SIGNATURE

Date