

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90345 023 ***158.75

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DOCUMENT # P02000040934

1. Entity Name
BLESSING'S BAKERY INC.



Principal Place of Business
723 PINE HILLS ROAD
ORLANDO FL 32808

Mailing Address
723 PINE HILLS ROAD
ORLANDO FL 32808

2. Principal Place of Business
SAME

3. Mailing Address
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

37-1435699

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

A1A CORPORATE SERVICES INC.
218 SOUTHERN COUNTRY LANE
QUINCY FL 32351

7. Name and Address of New Registered Agent

Name
HENECK ANNEUS

Street Address (P.O. Box Number is Not Acceptable)

6143 Glen Barr AVE

City
ORLANDO

FL

Zip Code
32809

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

Rev. Heneck Anneus
Signature, typed or printed name of registered agent and title if applicable.

Rev. HENECK ANNEUS
(NOTE: Registered Agent signature required when reinstating)

4/1/03
DATE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
ANNEUS, HENECK
6143 GLEN BARR AVE
ORLANDO FL 32809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANNEUS, MARIE MARTHE
6143 GLEN BARR AVE
ORLANDO FL 32809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
HENECK ANNEUS
6143 Glen Barr AVE
ORLANDO, FL 32809 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANNEUS, MARIE MARTHE
6143 Glen Barr AVE
ORLANDO, FL 32809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PEKERO ANNEUS
6143 Glen Barr AVE
ORLANDO, FL 32809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANNEUS, PAOLA
6143 Glen Barr AVE
ORLANDO, FL 32809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HENECK ANNEUS
Date

Daytime Phone #

CR2E034 (10/02)