2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2004 8:00 am
Secretary of State
04-26-2004 90493 046 ***150.00

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DOCUMENT # P03000061202

1. Entity Name
PALERMO BAKERY, INC.

Principal Place of Business	Mailing Address
1402 BOYNTON BEACH BOULEVARD BOYNTON BEACH, FL 33426 US	1402 BOYNTON BEACH BOULEVARD BOYNTON BEACH, FL 33426 US

2. Principal Place of Business	3. Mailing Address
860 N. Federal Hwy	860 N. Federal Hwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Bch. FL	City & State: Pompano Bch, FL
Zip: 33060 Country:	Zip: 33060 Country:

04152004 Chg-P CR2E034 (10/03)

4. FEI Number: 80 - 0070061 ☐ Applied For ☐ Not Applicable

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
VINCENT J. PIAZZA, P.A. 2499 GLADES ROAD SUITE 112 BOCA RATON, FL 33431	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, 2004 Fee will be $550.00

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 ORLANDO, GIROLAMO ~~1402 BOYNTON BEACH BOULEVARD~~ ~~BOYNTON BEACH, FL 33426~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10387 Oak Meadow Lane Lake Worth, FL 33467	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CIRRITO, JOSEPH 1402 BOYNTON BEACH BOULEVARD BOYNTON BEACH, FL 33426	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V TETREAULT, VER[illegible] 1402 BOYNTON B[illegible]H BOULEVARD BOYNTON BEAC[illegible]33426	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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: Girolamo Orlando
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #