

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000060461

1. Entity Name

FORERO BAKERY, CORP.



Principal Place of Business

3310 EMERALD POINTE DR
APT 102-A
HOLLYWOOD FL 33021

Mailing Address

3310 EMERALD POINTE DR
APT 102-A
HOLLYWOOD FL 33021



2. Principal Place of Business - No P.O. Box #

3310 Emerald Pointe Dr
Suite, Apt. #, etc.
DP-102A

3. Mailing Address

Same
Suite, Apt. #, etc.
Same

1st MOORE

CR2E034 (10/06)

City & State

Hollywood FL

City & State

Same

4. FEI Number

20-2750875

Applied For

Not Applicable

Zip

Country

33021

Zip

Country

Same

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUEVARA, ENRIQUE
630 S STATE ROAD 7
MARGATE FL 33068

7. Name and Address of New Registered Agent

Name

Same
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

Olga Forero

Olga Forero

03-31-02

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, 2007 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 P
NAME FORERO, OLGA
STREET ADDRESS 3310 EMERALD POINTE DR APTO 102-A
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
U000000705747
04/24/07-80005-012 150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
U000000705747
04/24/07-80005-013 8.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
U000000705747
04/24/07-80005-014 5.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Olga Forero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03-31-02

9544014145