

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000082830

Entity Name: CEDAR'S BAKERY INC

FILED
Nov 21, 2007
Secretary of State

Current Principal Place of Business:

7814 SNAPPING TURTLE CT
HUDSON, FL 34667

New Principal Place of Business:

14513 N. NEBRASKA AVE
TAMPA, FL 33613 US

Current Mailing Address:

7814 SNAPPING TURTLE CT
HUDSON, FL 34667

New Mailing Address:

14513 N. NEBRASKA AVE
TAMPA, FL 33613 US

FEI Number: 20-5153273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSAS, CAMIL
7814 SNAPPING TURTLE CT
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

ASSAF, CAMIL
14513 N. NEBRASKA AVE
TAMPA, FL 33613 US

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.

SIGNATURE: CAMIL ASSAF

11/21/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ASSAS, CAMIL
Address: 7814 SNAPPING TURTLE CT
City-St-Zip: HUDSON, FL 34667

Title: V () Delete
Name: ASSAS, MARY A
Address: 7814 SNAPPING TURTLE CT
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALIBA, JEAN PIERRE
Address: 14513 N. NEBRASKA AVE
City-St-Zip: TAMPA, FL 33613

Title: VP (X) Change () Addition
Name: ASSAF, CAMIL
Address: 14513 N. NEBRASKA AVE
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAMIL ASSAF

VP

11/21/2007

Electronic Signature of Signing Officer or Director

Date