## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000091601

Entity Name: BAYAMESA BAKERY II, INC.

FILED Dec 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 SW 67 AVE. MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

1200 SW 67 AVE. MIAMI, FL 33144

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEREZ, JORGE L. VARGAS, CLAUDIYOLY 1820 SW 98 CT. 1200 SW 67 AVE. MIAMI, FL 33165 US MIAMI, FL 33144 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: CLAUDIYOLY VARGAS 12/10/2007

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 PD
 (X) Change ( ) Addition

 Name:
 PEREZ, JORGE L.
 Name:
 NODARSE, ORESTES

 Address:
 1820 SW 98 CT.
 Address:
 1200 SW 67 AVE.

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 1820 SW 98 CT.
 Address:
 1200 SW 67 AVE.

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33144 US

Title: V ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 BATISTA-PEREZ, BETTY
 Name:
 VARGAS, CLAUDIYOLY

 Address:
 1820 SW 98 CT.
 Address:
 1200 SW 67 AVE.

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33144 US

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: ORESTES NODARSE PD 12/10/2007