


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000021631</b> 1. Entity Name <b>MARY'S DONUTS, INC.</b>	
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Principal Place of Business <b>30125 S. DIXIE HIGHWAY HOMESTEAD, FL 33033 US</b>	Mailing Address <b>30125 S. DIXIE HIGHWAY HOMESTEAD, FL 33033 US</b>
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04172004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0401207</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**GONZALEZ, ENRIQUE III  
2 SOUTH BISCAYNE BLVD.  
SUITE 3400 - ONE BISCAYNE TOWER  
MIAMI, FL 33131-1897**

**DO NOT WRITE  
IN THIS SPACE**

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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GUTIERREZ, JUAN F 8210 SW 28TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FERNANDEZ, EUSTAQUIO R 8210 SW 28TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MALAGON, GIRALDA 8210 SW 28TH ST MIAMI, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/04/04-80094-005 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**JUAN F. GUTIERREZ** 4-19-04 305-323-1330

Date

Daytime Phone #