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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 29 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000024881 (3)

FATHER & SON BAKERY, INC.

| Principal Place 950 SW 8 ST MIAMI FL 33130 | of Business | Mailing Address 950 SW 8 ST MIAMI FL 33130-3706 | | | | | | | |
|--|--|--|--------------------------|-----------------|--|---|--------------------------------|-----------------------|--------------------------------|
| | | | | | | 3. Date Incorporated or Qualified 04/05/1993 | | te of Last | Report |
| 2. Principal Pla | ce of Business | 2a. Marring Address | | | | 4. FEI Number | | A | Applied For |
| 21 Suite, Apt. # | , etc | 26 Suite, Apt. #, etc. | | | *************************************** | 65-0403965 | | | Not Applicable |
| 27 | | | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be | | | | |
| 23 Zip | Country | 28 Zip | Cour | itrv | | Trust Fund Contribution 8. This corporation has liability for | ll | | to Fees |
| 24 | 25 | 29 | 30 | | | | Yes [| | 8. 199.032, |
| | g, Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Re | gistered / | igent | |
| | RERO, JOSE E | | • | 81 | Name | | | | |
| | W 8 ST | | Ī | B2 | Street Add | ress (P.O. Box Number is Not Accepta | ole) | | |
| IMAMI | FL 33130 | | - | B3 | | | | | |
| • | | | Ľ | | | | | | |
| | | | • | 84 | City | | FL | 85 Zip | Code |
| orace or rec | the provisions of Sections 607 050; gistered agent, or both, in the State familiar with, and accept the obliga | of Florida, Such change was a | authorized | DW | the cornors | poration submits this statement for the ation's board of directors. I hereby acce | ourpose of pt the appo | changing antment a | its registered s registered |
| si | grative i typed or printed name of logisleved ager | it and tife 1 approable (NOT | E: Registered | Agen | t signature requ | ired when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | | ······································ | ADDITIONS/CHANGES TO OFFI | CERS AND | | |
| | d Guerrero, Jose e | L_ DELETE | 11 1111 | | | | | L Change | Addition |
| | 2023 SW 4 ST | | 1.2 NAM | | ADDAESS | | | | |
| | MIAMI FL 33135 | | 14 CITY | | | | | | |
| | D | DELETE | 21 TITL | | | | | Change | Addition |
| | GUERRERO, HECTOR E | | 2 2 NAN | ΛE | | | | | |
| L L | 2023 SW 4 ST | | 2 3 STR | EET A | ADDRESS | • | | | |
| | MIAMI FL 33135 | | 2. 4 CIT | | r- ZIP | | | | |
| TOTALE | | L_] DELETE | 3.1 TITL | | | | | L Change | Addition |
| NAME STEEET ADORESS | | | 3.2 NAN | | DDDCCC | | | | |
| CITY - ST-ZIP | | | 3.4. CIT | | ADDRESS | | | | |
| TITLE | | DELETE | 4.1 TiTt | | 1-411 | | | Change | Addition |
| NAME | | | 4. 2 NA | WE | | | | • | |
| STFEET ADDRESS | | | 4.3 STR | EET A | DDRESS | | | | |
| CITY-ST-ZIP | | · | 4.4 CITY | /- \$ T- | - ZIP | | | | |
| TITLE | | ☐ DELET E | 5.1 TITE | | | | | Change | Addition |
| NAME PROPERT ADMINISTRA | | | 5.2 NAM | | | | | | |
| STREET ADDRESS CITY - ST- ZIP | | | | | ADDRESS | | | | |
| TITLE | ************************************** | DELETE | 5.4 CITY 6.1 TITL | | - <u> </u> | | | Change | Addition |
| NAME | | Book Committee | 6.2 NAM | | | | | - Simila | L Addition |
| STREET ADDRESS | • | | 6.3 STRI | | DDRESS | | | | |
| C TY - S1 - ZIP | | | 6.4 CITY | ′-ST- | - ZIP | | | | |
| information Lam an offic | indicated on this annual report or se | upplemental annual report is tr the receiver or trustee empow | rue and ac ered to ex | CUL | ate and tha | d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 607, Florida S | d offect ac | it made us | adar aatbi tha |
| SIGNATU | JRE: SIGNATURE AND TYPED OR | PRINTED NAME OF SIGNING OFFICER | OR DIRECTO | . i | ; ; | //26/47 (3 | (Pa) 8. | 5°F-≥ | 111 |