

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State

07-25-2002 90121 006 ***150.00

DOCUMENT # P93000032394

1. Entity Name

BONAFIDE INTERNATIONAL BAKERY & CAFE CORP.

Principal Place of Business

1617 NE 163RD STREET
 N MIAMI BEACH FL 33162
 US

Mailing Address

1617 NE 163RD STREET
 N MIAMI BEACH FL 33162
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0406043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GALVEZ, CORAZON C

1115 NE 1 CT

A

HALLANDALE FL 33009

Name

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P	GALVEZ, CORAZON C	1115 NE CT STE A HALLANDALE FL				
	V	GALVEZ, ANGELA V	1115 NE 1 CT STE A HALLANDALE FL				
	S	GALVEZ, DANIEL A	1327 N PARK RD HOLLYWOOD FL				
	T	CHAYER, LUCIA A	1901 N 35 AVE HOLLYWOOD FL			7535 N.W. 19 Drive Pembroke Pines FL 33024	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/22/02 *(305) 949-5113*

CR2E034 (4/02)

Attachment #

122845

July 10, 2002

DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENT SECTION
P.O. BOX 6327
TALLAHASSEE, FL 32314-6327

Re: BONAFIDE INTERNATIONAL BAKERY &
CAFE CORP.
DOCUMENT # P93000032394

Gentlemen:

I, Lucy Chaver as a Secretary of the above mentioned Corporation, hereby CERTIFY: Taht I never received the Corporation Annual Report from yours department, to be paid between January 1 to May 1 of each calendar year.

Enclosed please find a check No. 1769, in the amount of \$ 150.00 in order to keep my corporation active.

Thanking you in advance for your cooperation in this matter.



LUCY CHAVER
1617 NE 163rd St
N. Miami Beach - Fla 33162

WITNESS my hand and official seal this 10th day of July, 2002.

Notary Public

