## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

MENT # P93000048059 (8)

1. Corporation Name	P93000048059	(8)
MARLINS BAKERY,	INC.	

\_\_\_\_\_

Principal Place of Business

Mailing Address



12857 N. KE Miami Fl. 33	ENDALL DRIVE 3186	14600 S.W. 52 STREE MIAMI FL 33175	<b>ा</b>			
				<ol> <li>Date Incorporated or Qualified 07/09/1993</li> </ol>	3a. Date of Last Report 04/10/1995	
2. Principal Pla	ace of Business	2a. Mailing Address			Applied For	
21		26 12857 No	KENDAU DE:	65-0511924	Not Applicable	
Suite, Apt. <i>i</i>	#. etc.	Suite, Apt. #, etc.	KENDAU DE: FL	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Žip	Country	Ζφ	Country• _	8. This corporation has liability for it		
24	25	<sup>29</sup> 33/86	30 HIAMI	Florida Statutes 📓 Yes	_ *	
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R	egistered Agent	
f			81 Name			
RODRIGUEZ, TOMAS			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
14600 S.W. 52 STREET MIAMI FL 33175 •		83	THE PERSON OF MANAGEMENT			
			84 City		ps 25 Code	
					FL 85 Zip Code	
or registere	to the provisions of Sections 607.050 ed agent, or both, in the State of Flo th, and accept the obligations of, Sec	edal Such change was authorz	ed by the corporation's boar	ration submits this statement for the puri rd of directors. I beredy accept the appo	cose of changing its registered office intrinent as registered agent. I am	
SIGNATURE	Signative Typical or printed name of register of age	ostan citine d'appel sher (Ale	F.E. Fugisland Agent signatur in pare	d wher rea stating:	Ew f	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	PTD	☐ DELETE	I 1 TiTu€		Change Addition	
NAME	RODRIGUEZ, TOMAS		1.2 NAME		•	
STREET ADDRESS	14600 S.W. 52ND ST.		1.3 STREET ADORESS			
CITY-ST-ZI2	MIAMI FL 33175		1.4 CITY+ST ZIP			
TITLE	SD	☐ DELETE	2 1 TRILE		☐ Change ☐ Addition	
NAME	Rodriguez, Maria e		2.2 NAME			
STREET ADDRESS	14600 S.W. 52ND ST.		2.3 STREET ADDRESS			
CITY - ST - ZI 2	MIAMI FL 33175		24 CITY - ST - ZIP			
THLE		☐ DEFELE	3 1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			33 STHEET ADDRESS			
CITY - ST - ZIP			3.4 CITY - ST - 7/P			
TITLE		☐ DELETE	4 1 TITLE	80000120	Change Addition	
NAME			4.2 NAME	<b>8000017</b> 5 -04/24/96010	にいなる。 16017	
STREET ADDRESS			4.3 STHEET ADDRESS	***200.00	10 011	
CITY - ST - ZIP			4 4 CrTY - ST - ZIP			
TIFLE		DELETE	5 1 TITLE		Change  Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
Crity-St-ZiP		FT perse	5 4 CITY - ST - ZIP			
TrillE		☐ DELETE	6 1 TIFLE		Change   Addition	
NAME			6 2 NAME			
STREET ADDRESS			6.3 STREET ADORESS			
CITY-ST-ZIP			6 4 CITY - ST - ZIF			

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13. I panged, or on an attachment with an address.

SIGNATURE:

MINING OFFICER OR DIRECTOR

4115/96 305-385-8105

CR2E034 (12/95)