FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000012339 (4)

RUTMAT BAKERY, INC.

FILED Apr 18 1997 8:00am Secretary of State



Principa! Place	of Business	Mailing Addr	Mailing Address 1561 W. OCKEECHOBEE ROAD HIALEAH FL 33010-2833						
1561 W. OCKEE(HIALEAH FL 330									
						3. Date Incorporated or Qualified 02/14/1995		of Last R	eport
2. Principal Pla	ice of Business	2a. Mailing A	ddress			4. FEI Number	-l'	Ap	plied For
21		26				65-0564244		No	t Applicable
Suite, Apt.#	, etc	Suite, Apt	. #, etc.			Certificate of Status Desired		\$8.75	Additional
22	77 74 44 44 44 44 44 44 44 44 44 44 44 4	27				5. Certificate by diatos besiled		Fee Re	quired
City & State		City & Sta	ite			6. Election Campaign Financing	_	\$5.00	
23		28				Trust Fund Contribution	<u> </u>	Added (
Ζ ιρ _ι	Country	Zip	·	Country		8. This corporation has liability for i			. 199.032,
24	25 9. Name and Address of Cu	29	30			Florida Statutes 10. Name and Address of New Re	Yes 🗍		
DI IDA	LCABA, LEONARDO	rrent negistered Age	nı	81	Name	10. Name and Address of New Ne	Aleteled Wi	jent	
	OCKECHOBEE ROAD			"					
	AH FL			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
пис	ANT FL			83					
				["]					
				84	City			85 Zip (Code
							<u>FL</u>	بـــــــــــــــــــــــــــــــــــــ	
11. Pursuant to	o the provisions of Sections 607 reistered arrent, or ≯ oth, in the S	0502 and 607,1508, Fl tate of Florida, Such c	lorida Statutes, the hanne was authori	e aboye izad by	e-named corpora	poration submits this statement for the p	urpose of c If the appoi	hanging It otment as	s registered registered
agent Lan	infamiliar with accept the o	bligations of, Section 6				tion's board of directors. I hereby accep	.f t	1	
SIGNATURE .	A FALLA				04SW	1 Whole Caba	410	197	
		d agent and title. Lapp icable.			nt signature requ	ired when reinstaling)	DATÉ	}	0.04.40
12.	PD	AND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFIC		Change	
1 11.1	RUBALCABA, LEONARDO	L		.1 TITLE			L	T Cusufic	Addition
	1561 W. OCKEECHOBEE R	M. 440	1	.2 NAME					
STREET ADDRESS	HIALEAH FL 33010	ID. # 10			ADDRESS				
7001-31-50	STD STD			.4 CITY - S	T-ZIP			7.00	The same.
		L	DELETE 2.	.1 TITLE	ļ		Į.	_] Change	Addition
	MARRERO, FIDEL	0.410	2	2 NAME					
	1561 W. OCKEECHOBEE R	D. FIU	: 2.	.3 STREET	ADDRESS				,
Gitti Gertle	HIALEAH FL 33010			4 CITY - S	T-ZIP				
101.6		L		1 TITLE			, L	Change	Additio
NAME			3.	2 NAME					
STREET ADDRESS			3.	.3 STREET	ADDRESS				
C-TY-SI-ZIP				4. CITY - S	T-ZIP				
THE			DELETE 4.	.1 TITLE			I	Change	☐ Addition
NAME			4.	. 2 NAME	1				
STREET ADDRESS			4.	.3 STREET	ADDRESS				
CHTY - S1 - ZIP			4.	.4 C <u>ITY~S</u>	T- Z IP	· · · · · · · · · · · · · · · · · · ·			
DT.E			DELETE 5.	. 1 TITLE				Change	Addition
NAME			5.	.2 NAME					
STHEET ADDRESS			5	3 STREET	ADDRESS				
CITY-SE-7 P				4 CITY-S	1 '				
T TLF			1 2 2 2 2 2	1 TITLE				Change	Addition
NAME			•	2 NAME			_	-	
STREET ADDRESS				3 STREET	ADDRESS				
CITY OLDER			•	4 City-Si					
CHT - 51 - 701			48 6	BERLIT - N	1-7P [

14. Lide 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 incloated 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: