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Secretary of State

04-26-1999 90114 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000060748

1. Corporation Name

WEST BOCA BAKERY, INC.

Principal Place of Business

 176 SARATOGA BLVD W
 ROYAL PALM BCH FL 33411
 US

Mailing Address

 176 SARATOGA BLVD W
 ROYAL PALM BCH FL 33411
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/07/1995

4. FEI Number

65-0603375

 Applied For
 Not Applicable
5. Certificate of Status Desired ☐
 \$8.75 Additional
 Fee Required

 6. Election Campaign Financing
 Trust Fund Contribution ☐

 \$5.00 May Be
 Added to Fees

 8. This corporation owes the current year tangible
 Personal Property Tax, ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

 DUPRESNE, DONALD P
 12788 FOREST HILL BLVD., STE. 2003
 WELLINGTON FL 33414

10. Name and Address of New Registered Agent

 81 Name **Russell Romano**
 82 Street Address (P.O. Box Number is Not Acceptable)
176 Saratoga Blvd. W.
Royal Palm Beach,
 83 City
FL 85 Zip Code **33411**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Camille Romano Vice President 4-6-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

 TITLE ☒ DELETE
 NAME **D ROMANO, RUSSELL**
 STREET ADDRESS **4871 VIA PALM LAKE, #703**
 CITY-STATE-ZIP **WEST PALM BEACH FL 33417**

 TITLE ☒ DELETE
 NAME **D ROMANO, CAMILLE**
 STREET ADDRESS **4871 VIA PALM LAKE, #703**
 CITY-STATE-ZIP **WEST PALM BEACH FL 33417**

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

 1.1 TITLE ☒ Change ☐ Addition
 1.2 NAME **D Romano, Russell**
 1.3 STREET ADDRESS **176 Saratoga Blvd W.**
 1.4 CITY-STATE-ZIP **Royal Palm Beach, FL 33411**

 2.1 TITLE ☒ Change ☐ Addition
 2.2 NAME **D Romano, Camille**
 2.3 STREET ADDRESS **176 Saratoga Blvd W.**
 2.4 CITY-STATE-ZIP **Royal Palm Beach, FL 33411**

 3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-STATE-ZIP

 4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-STATE-ZIP

 5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-STATE-ZIP

 6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-STATE-ZIP

14. 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 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 11 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Camille Romano

SIGNATURE IS A TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-99

Date

561-792-0090

Telephone Number

CR2E034 (1/98)