

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000008677

1. Entity Name
SOUTH FLORIDA BAKERY, INC.



Principal Place of Business
14159 SW 144 ST
MIAMI, FL 33186 US

Mailing Address
14159 SW 144 STREET
MIAMI, FL 33186



03162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0642086

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAROUGH, ALBERTO EA
13165 SW 142 TER
MIAMI, FL 33186

**DO NOT WRITE
IN THIS SPACE**

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 retreating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TD
BERNARDO, CARMEN
11390 S.W. 26TH STREET
MIAMI, FL 331652256

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VD
BERNARDO, RICARDO
11390 S.W. 26TH STREET
MIAMI, FL 331652256

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
SD
BERNARDO, R J
2401 COLLINS AVE.
MIAMI BEACH, FL 33140

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PD
BERNARDO, LOURDES
6250 SW 163 PL
MIAMI, FL 33193

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000434572
04/12/06 00047-016 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Bernardo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-28-06

Date

Daytime Phone #