2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P96000008677 01-18-2007 90104 027 ***158.75 SOUTH FLORIDA BAKERY, INC. Principal Place of Business Mailing Address 14159 SW 144 ST 14159 SW 144 STREET MIAMI, FL 33186 US MIAMI, FL 33186 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-0642086 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AVEL A. GONZALEZ P.A BAROUGH, ALBERTO EA Street Address (P.O. Box Number is Not Acceptable 13165 SW 142 TER MIAMI, FL 33186 2688 S.W. 1374 AUE City MIAMI 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 (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition TÜLE Delete TITLE BERNARDO, CARMEN NAME NAME STREET ADDRESS 11390 S.W. 26TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 331652256 CITY-ST-7IP Change Addition TITLE ☐ Defete TITLE BERNARDO, RICARDO NAME NAME 11390 S.W. 26TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 331652256 CITY-ST-7IP Change ☐ Addition TITLE Delete TITLE NAME BERNARDO, R J NAME STREET ADDRESS STREET ADDRESS 2401 COLLINS AVE. MIAMI BEACH, FL 33140 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE □ Change Addition BERNARDO, LOURDES NAME NAME 6250 SW 163 PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33193 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

vando (RICARDO BERNARDO)

FILED

Jan 18, 2007 8:00 am

305-256-1777