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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000091536

1. Corporation Name

LA ESPIGA DE ORO BAKERY, INC.

Principal Place of Business 722 EAST 27 STREET HIALEAH FL 33013	Mailing Address 722 EAST 27 STREET HIALEAH FL 33013			DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualifed 11/07/1996				
2. Principal Place of Business 21 210 N.E. IST STREET	2a. Mailing Address 26 210 N.E. 1ST	STREE	4. FEI Number 65-0706879	Applied For Not Applical			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State  23 MIAMI FLOPIDA	City & State 28 MIAMI FLORIDA	7	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country  24 33135 25 U.S.A.	Zip Co. 29 33135 30 U.	S.A.	This corporation owes the current year     Personal Property Tax.	ntangible ☐ Yes XNo			
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
HERNANDEZ, CRISTOBAL		81 Nam	ANTONIO O. RABAZA				
722 EAST 27 STREET		82 Stree	et Address (P.O. Box Number is Net Afferbable) EE	\$210 Box Number is Not Affents The EET			
HIALEAH FL 33013		83					
		84 City	MIAMI FLORIDA <b>F</b>	L 85 3 7 Code			

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 apply 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 Signature, typed of printing same for largitationed agent and title if applicable. (NOTE: Registered Agent signature required when reinstatung)  DATE										
12.	ØFFICERS AND DIR		13.	, ADDITIONS/CHANGES TO OFFICERS						
TITLE	D /	X DELETE	1.1 TITLE ~	ANTONIO RABAZA	X∑ Change	Addition				
NAME	HERNANDEZ, CRISTOBAL		1.2 NAME	210 N.E. 1ST STREET						
STREET ADDRESS	722 EAST 27 STREET		1.3 STREET ADDRESS	MIAMI FLORIDA. 33135		-				
CITY-ST-ZIP	HIALEAH FL 33013	•	1.4 CITY-ST-ZIP	MIAMI THORIBM: 33133						
TITLE		☐ DELETE	2.1 TITLE	D/7/5	Change	X Addition				
NAME			2.2 NAME	MARICELA LOPEZ						
STREET ADDRESS			2.3 STREET ADDRESS	13210 S.W. 50TH STREE	Γ	j				
CITY-ST-ZIP			2.4 CITY-ST-ZIP	MIAMI FLORIDA. 33175						
TITLE	,	☐ DELETE	3.1 TITLE		Change	☐ Addition				
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS		•	1				
CITY-ST-ZIP			3.4. CITY+ST-ZIP							
TITLE		☐ DELETE	4.1 TITLE		Change	Addition				
NAME			4, 2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS			•				
CITY-ST-ZIP			4.4 CITY-ST-ZIP							
TITLE		☐ DELETE	5.1 TITLE		Change	Addition				
NAME			5.2 NAME		•					
STREET ADDRESS			5.3 STREET ADDRESS			}				
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE		☐ DELETE	6.1 TITLE	}	Change	☐ Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
			64 CITY-ST-7IP			Į				

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 suppliemental 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 on this corporation of the corporation of th Block 12 or Block 13 if change

SIGNATURE:

URE REQUITONIO RABAZA (PRESIDENT)

03/14/99

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90152 057 \*\*\*\*\*8.75

04-14-1999 90152 058 \*\*\*150.00

Applied For Not Applicable