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FILED

Apr 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000094787 (4)

1. Corporation Name  
ROYAL DUTCH EUROPEAN BAKERS BY BROSCH, INC.



Principal Place of Business  
4000-DN. ORANGE BLOSSOM TRAIL  
ORLANDO FL 32804

Mailing Address  
4000-DN. ORANGE BLOSSOM TRAIL  
ORLANDO FL 32804

3. Date Incorporated or Qualified  
11/20/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip Country

4. FEI Number  
59-3423349

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 has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

WOLFE, LARRY  
200-A JOHN KNOX ROAD  
TALLAHASSEE FL 32303-6643

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip 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, 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 DATE 4-2-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DITSCH, PETER	
STREET ADDRESS	ROBERT-BOSCH-STR. 44-55129	
CITY - ST - ZIP	MAINZ, GERMANY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BOBBE, JACQUES	
STREET ADDRESS	400-DN. ORANGE BLOSSOM TR.	
CITY - ST - ZIP	ORLANDO FL 32804	
TITLE	D	<input type="checkbox"/> DELETE
NAME	EYSENS, PETER	
STREET ADDRESS	RYNBURGER WEG 83-2234	
CITY - ST - ZIP	BJ LEIDEN NETHERLANDS	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DATE 4-2-97

CR2E034 (9/96)