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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041002 (1)

TRINADADIAN & JAMAICAN BAKERY, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address				
,				CO NOT MUNITS IN THIS PRACE	
995 MALLARD ROAD WESTON FL					
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				05/05/1997	
2. Principal Place of Business	2a, Mailing Address			4, FEI Number Applied For	
5914 HALLANDE Beach Blug 26				7 65-075 2642. Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			S8.75 Additional	
22	27			5. Certificate of Status Desired Fee Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be	
B Hollyword. Florida 28		,		Trust Fund Contribution	
— Zip zz na 2 — Country		Countr	ry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due tune 30.	
27	# ² 29 of Current Registered Agent	30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
	of Chilent Hegistered Agent	8.	1 Name		
Crammer, Edwin L 7481 W. Oakland Park B	II MD #2	Ļ	X X 27	and A Fleather Rowald A Fletcher	
LAUDERHILL FL	DL V D. W Z	82	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
CHODENMICE FE		<u> </u>		2 STATISTICS ROLL	
	4	رحے			
		84	4 City	125 Ton FL 85 Zip Code 333327	
11. Pursuant to the provisions of Sections	s 607 0502 and 607 1508, Florida Statuti	es, the abo	ve-named corr	poralion submits this statement for the nurgoes of changing its registered	
office or registered agent, or both, in agent. Lam familiar with, and accept t	the State of Florida. Such change was a the obligations of, Section 607.0505, Flo	ruthorized b prida Statutr	oy the corporates.	tion's board of directors. I hereby accept the appointment as registered	
CIGNATURE V RONALD A.	FIFTCHFIC		Kall	1. flat 4/n/98	
Signature, typed or pented name of re-	getered agent and trie if applicable (NO)		gont signature requi	Teo Wisit Tensialing) OATE 2	
	CERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME FLETCHER, EVE	DELETE	11 THLE	!	C Shange C Addition	
AND MALL LADO DOAD		1.2 NAME			
WESTON E		1	ET ADDRESS		
TITLE D	DELETE	1 4 CITY-		Change Addition	
NAME FLETCHER, RONALD		2.2 NAME	į.		
STREET ADDRESS 395 MALLARD ROAD			E1 ADDRESS		
CITY-ST-ZIP WESTON FL		2 4 CITY	į į		
TITLE D	DELETE	3.1 TITLE		Change Addition	
NAME RAMOUTAR, CURTIS	/ `	3.2 NAME	E		
STREET ADDRESS 395 MALLARD ROAD		3 3 STRE	F1 ADDRESS		
CITY-ST-ZIP WESTON FL		3.4. CITY	-SI-ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		4.2 NAM	IÉ		
STREET ADDRESS		4.3 STRE	ET ADDRESS		
CITY-ST-ZIP		4.4 CITY	-ST-ZIP		
TITLE	☐ DEL e te	5.1 TITLE		Change Addition	
NAME		5.2 NAME			
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP	Tori tree	5.4 CITY		Change Addition	
TITLE	☐ DELETE	6.1 TITLE	!	☐ Change ☐ Addition	
NAME		6.2 NAME	1		
STREET ADDRESS			ET ADDRESS		
City-St-ZiP	conted with this films does not qualify for	6.4 CITY		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 Statules; and that my name appears in Block 12 or Block 13 if changed of one attachment with an address.