

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000097539

Entity Name: LE MANA BAKERY, INC.

FILED
May 21, 2009
Secretary of State

Current Principal Place of Business:

2332 W. OAKRIDGE ROAD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

2332 W. OAKRIDGE ROAD
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3482657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ-CARRILLO, LILLIANNA
2944 CRYSTAL CREEK BLVD
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

LOPEZ-CARRILLO, LILLIANNA
1045 HOME GROVE DRIVE
WINTER GARDEN, FL 32837 US

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.

SIGNATURE:

05/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPEZ, EUGENIO
Address: 1057 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: T () Delete
Name: LOPEZ, ADA
Address: 1057 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VP () Delete
Name: LOPEZ-CARRILLO, LILLIANNA
Address: 1057 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S (X) Delete
Name: LAMOURT, SANDRA
Address: 2944 CRYSTAL CREEK BLVD
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMOURT, SANDRA
Address: 1045 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP (X) Change () Addition
Name: LOPEZ, ADA
Address: 1045 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S (X) Change () Addition
Name: LOPEZ-CARRILLO, LILLIANNA
Address: 1045 HOME GROVE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLIANNA LOPEZ-CARRILLO

S

05/21/2009

Electronic Signature of Signing Officer or Director

Date