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 # P98000044049

1. Corporation Name

FANCY BAKERY, INC.

May 17, 1999 8:00 am Secretary of State

05-17-1999 90040 041 ***150.00



N. Harden					
Principal Place	e of Business	Mailing Address			
7183 - 7185 S.W. 8TH STREET MIAMI FL 33144		7183 - 7185 S.W. 8TH STREET MIAMI FL 33144			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 05/15/1998
2. Principal Place of Business		2a. Mailing Address			4. FELNumber Applied For Not Applicable
21		26 Suite Ast # ste			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired
22 City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		Zip Country		У	8. This corporation owes the current year Intendible
24	25	29 30	30		Personal Property Tax.
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
LOPEZ, GUIDO A			81	Nar	Name
117		82	Stre	t Address (P.O. Box Number is Not Acceptable)	
	VII FL 33126		83	3	
Š					City 85 Zip Code
	•		84	,	FL · ·
office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	orized by a Statute:	the cos.	amed corporation submits this statement for the purpose of changing its registered e corporation's board of directors. I hereby accept the appointment as registered
42	Signature, typed or printed name of registered agent OFFICERS AND		13.	ent signat	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OFFICERS AND	DELETE	1.1 TITLE		Change Addition
NAME	LOPEZ, JORGE	-	1 2 NAME		
STREET ADDRESS	7183 - 7185 S.W. 8TH STREET		1.3 STREE	ET ADDRE	DDRESS :
CITY-ST-ZIP	MIAMI FL 33144		14 CITY-5	ST-ZIP	
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DIAZ, SONIA		2.2 NAME		
STREET ADDRESS	7183 - 7185 S.W. 8TH STREET		2.3 STREET AL		DDRESS
CITY-ST-ZIP	MIAMI FL 33144		2. 4 CITY-	ST-ZIP	
TITLE	2 332 3	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	Change Addition
TITLE		T OFFEIF	4.1 TITLE 4.2 NAME	-	
NAME			4.3 STREE	-	nopece
STREET ADDRESS	•				
CITY-ST-ZIP TITLE			5.1 TITLE	J1-21P	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	ET ADDRI	DORESS
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	IP P
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREE	ET ADDRI	DORESS
			0.4.0/D(.)		20

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 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, with all other like empowered.

SIGNATURE: