2901 UNIFORM BUSINESS REPORT (UBR)

Mar 21, 2001 8:00 am **DOCUMENT #** P99000018711 **Secretary of State** 1. Entity Name 03-21-2001 90078 037 ***150.00 Gourmet Cookies & More Corp. Principal Place of Business Mailing Address 12205 S.W. 131st Ave. 12205 S.W. 131st Ave. Miami, FL 33186-6401 Miami, FL 33186-6401 A0035514 2. Principal Place of Business 3. Mailing Address. Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 65-0898632 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent <u>Torres-Gregory, Héctor L</u> Street Address (P.O. Box Number is Not Acceptable) 14720 S.W. 144th Terr. Fiol, José M. 15730 S.W. 152nd Ave. Miami, FL 33187 ciy Miami Zip Code: 8. 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. Héctor L. Torres-Gregory SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$160.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State CR2E034 (11/00 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Torres-Vilá, Héctor L. NAME NAME STREET ADDRESS STREET ADDRESS 1605 Ponce de León Ave., #701 CITY - ST - ZIP CITY - ST - ZIP <u>San Juan, PR 00909</u> TITLE D/VP TITLE Fiol, José M. 15730 S.W. 152nd Ave. Miami, FL 33187 NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE D/S/T--TITLE -- Comme Change - Addition Torres-Gregory, Héctor L. 14720 S.W. 144th Terr. Miami, FL 33196 NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE D/S/T TITLE Addition Malavé, Angela 14720 S.W. 144th Terr. Miami, FL 33196 NAME MAUF STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE TITLE Addition Delete NAME NAME STREET ADDRESS STREET ADDRÉSS CITY - ST - ZIP CITY - ST - ZIP TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. ... SIGNATURE: 305-256-9123 Héctor L. Torres-Gregory

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #