

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

DOCUMENT # P99000061366

1. Entity Name

MI CALI BAKERY, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

04-28-2000 90029 023 ***150.00

Principal Place of Business

2582 WEST 56TH STREET
#202
HIALEAH FL 33016

Mailing Address

2582 WEST 56TH STREET
#202
HIALEAH FL 33016-4022

2. Principal Place of Business

2350 W 60st

3. Mailing Address

the

Suite, Apt. #, etc.

14

Suite, Apt. #, etc.

SAME

City & State

HIALEAH FL

City & State

HIALEAH FL

Zip

33016

Country

USA

Zip

33016

Country

USA

4. FEI Number

59-3587662

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUTERREZ JOSE A
2582 WEST 56TH STREET
#202
HIALEAH FL 33016

7. Name and Address of New Registered Agent

Name GUTERREZ JOSE A

Street Address (P.O. Box Number is Not Acceptable)

2350 West 60 Street #14

City

HIALEAH

FL

Zip Code

33016

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

05/15/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME GUTERREZ, JOSE A
STREET ADDRESS 2582 WEST 56TH STREET #202
CITY-ST-ZIP HIALEAH FL 33016 ☒ Delete

TITLE
NAME GUTERREZ JOSE A
STREET ADDRESS 2350 West 60 Street #14
CITY-ST-ZIP HIALEAH FL 33016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

JOSE A GUTERREZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/06/00 (305) 823 3682

the first one I send the check and now I put in the form (FEI) and my new Address. Fax (305) 828-5201

CR2E034 (9/99)