DOCUMENT # P99000063106 1. Entity Name								, . E11			
Bread Home, INC.								FILED 01 HAY -4 PM 3.18			
Principal Place of Business 1470 NE 123 ST. # 412 N. Miami, FL 33161				Mailing Address 141 NE 3 174E. #604 Miami, FL 33132			+	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State				City & State			4. 1			pplied For ot Applicable	
Zip	Country			Zip	·		5. Certificate of Status Desired				
				Registered Agent		Name -	7. [Name and Address of New Re	gistered A	gent	
	Marc	garet	123 Y	ST. #412		Name Street Addres	ss (P.O. B	lox Number is Not Acceptable)		<u></u>	
W. Wiami, FL				10186							
·					City				FL	Zip Cod	e
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 purple name of registered agent and title if applyingle. (NOTE: registered Agent signature required when reinstating) DATE											
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)				After MAY 1.	FILE NOW!!! FEE IS \$150.00 After MAY:1, 200! Fee will be \$550.00 Make Check Payable to Department of State			10. Election Campaign Finar Trust Fund Contribution.	` 🗆	Added	May Be to Fees
11.	PID		FICERS AND	□ Delete	12.	E .	AD	DITIONS/CHANGES TO OFFIC		DIRECTOR:	S IN 11
NAME. STREET ADDRESS	uarga 1470 D	E 123	SOU26 ST. # 1 FL 33	7 H2	NAM STRE			200004 -05/11	194 701	902 01015-	23
NAME STREET ADDRESS CITY-ST-ZIP		,		☐ Delete		· · · · · · · · · · · · · · · · · · ·		******		☐ Change	Addition
TITLE. NAME STREET ADDRESS CITY ST-ZIP				☐ Delete					1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST ZIP				☐ Delete						Change	Addilion
TITLE NAME STREET ADDRESS CITY-ST-ZIP			14. <u>16</u> .49	☐ Delete					[Change	☐ Addition
TITLE NAME				☐ Delete	TITLE	 -			[Change	☐ Addition
STREET ADDRESS CITY: ST-ZIP					CITY	ET ADDRESS - ST- ZIP				78	Ĺ
13. I hereby ce	ertify that the	information	supplied with	this filing does not qualify f	or the exer	mption stated in	Section 1	19.07(3)(i), Florida Statutes. I fu	rther certify	y that the in	formation

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:

Page rosa

BREAD HOME, INC. DOC.#P99000063106

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONEL CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NCTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY,

MARGARETH SOUZA

PRESIDENT