2007 FOR PROFIT CORPORATION

FILED 0 AM ate

ANNUAL REPORT					Jan 18, 2007 08:0		
1. Entity Nan	MENT # S57011 BAKERY OF MIAMI, INC.				5	ecretary of St	
7310 COLLI	ce of Business INS AVENUE CH, FL 33141	Mailing Address 7310 COLLINS AVENUE MIAMI BEACH, FL 33141					
				01162007	No Chg-P	CR2E034 (11/05)	
	OO NOT WRITI	E IN THIS SPA	CE	4. FEI Numb 65-020 5. Certificate		Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Currer	it Registered Agent		<u> </u>		1 00 110401100	
9008 FRC	, JACQUELINE DUD AVE E, FL 33154			NOT WI			
	e named entity submits this statement tions of registered agent. Signature, typed or printed name of registered age		ered office or register		th, in the State of Flor	da I am familiar with, and accept	
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution.							
10. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN ST COLEMAN, PHILIP 7310 COLLINS AVE MIAMI BEACH, FL 33141 P PADRON, JACQUELINE 7310 COLLINS AVE	D DIRECTORS				í	
CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-S1-ZIP TITLE	MIAMI BEACH, FL 33141				NOT WI	•	
NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP					11110 01		
NAME STREET ADDRESS				-			

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementation of the corporation or the receiver of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Prione #