



**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	
<p>After Filing Return To:  <b>CT CORPORATION</b>          17 South High Street          Columbus, OH 43215</p> <p style="font-size: 2em; font-weight: bold;">FILING 1ST</p>	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	

**1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME			
OR	1b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
	<b>BERROA</b>	<b>KELVIN</b>	
1c. MAILING ADDRESS		CITY	STATE
<b>79 FAIRVIEW AVENUE</b>		<b>PAWTUCKET</b>	<b>RI</b>
		POSTAL CODE	COUNTRY
		<b>02860</b>	<b>USA</b>
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION
		<b>Sole Proprietorship</b>	<b>RHODE ISLAND</b>
			1g. ORGANIZATIONAL ID #, if any
			<input checked="" type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

2a. ORGANIZATION'S NAME			
OR	2b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE
		POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION
			2g. ORGANIZATIONAL ID #, if any
			<input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)**

3a. ORGANIZATION'S NAME			
OR	3b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE
<b>AIB INTERNATIONAL CENTRE</b>		<b>IFS</b>	
		POSTAL CODE	COUNTRY
		<b>DUBLIN 1</b>	<b>IRELAND</b>

4. This FINANCING STATEMENT covers the following collateral:

The Distribution Rights granted to Debtor pursuant to that certain Bill of Sale and that certain Distribution Agreement, each dated as of April 16, 2007, by and between Debtor and George Weston Bakeries Distribution Inc. (as hereafter amended, modified or supplemented, the "Distribution Agreements"), together with other assets used by the Debtor in the operation of his/her business;

b) a certain Norand handheld computer and a certain Norand van mounted printer;

c) all equipment, inventory, accounts, good, property, contract rights, chattel paper and general intangibles related to or arising from Borrower's business, whether now or hereafter existing or acquired and wherever located;

d) any and all accessions, replacements and additions to or of the foregoing; and

e) all cash or non-cash proceeds (including insurance proceeds) of the foregoing.

5. ALTERNATIVE DESIGNATION	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LEIN	<input type="checkbox"/> NON-UCC FILING
6.	<input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) or recorded in the REAL ESTATE RECORDS (Attach addendum) (if applicable)	7. Check to REQUEST REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						
40501341						6928761-EC