



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Food Safety

Bureau of Food and Meat Inspection
Attention: Records Section
3125 Conner Boulevard, C-26
Tallahassee, Florida 32399-1650

FOOD SAFETY INSPECTION SUPPLEMENTAL REPORT
(from Enterprise Database)

F.S. Chapter 500.172, 500.174
(850) 245-5520

3225467700203
Visit #: 322-5467-7002-03

Print Date: October 10, 2011

Firm Num: 291361
Bus Name: HABIBA BAKERY
Date Of Visit: April 20, 2011
Firm Location Address: 14611 LIVINGSTON AVE, LUTZ, FL 33559-3102
Firm Mailing Address: 14611 LIVINGSTON AVE, LUTZ, FL 33559
Firm Type/Description: 141/RETAIL BAKERY W/FS
Firm Owner: BAKER BUSINESS INC (DBA HABIBA BAKERY)

Owner Code:

STOP SALE ORDER AND RELEASE

You are hereby ordered to withhold from movement, sale or use subject to further instructions from an authorized agent of the Department of Agriculture and Consumer Services, the goods or equipment listed below.

Article: STORE PACKED PRODUCTS
Brand Name: STORE MADE
Number Products: 0 Lot #: # Of Pkgs: 100 Size Of Pkg: VARIOUS Total Weight: 200
Manufacturer: Invoice #:
Distributor: Invoice Date:

The primary reason and condition that caused the product or equipment stop sale or stop use and determined dangerous, unwholesome, fraudulent, or insanitary was: FS 500.04; FS 500.11 MISBRANDED * Food label is missing or incomplete. INCOMPLETE LABELING ON THE STORE PACKED PRODUCTS

Conditions under which the articles were released from this order: See comments.

Comments: THE FIRM WILL BE GIVEN UNTIL THE NEXT INSPECTION TO COMPLETE THE LABELING

AN ADMINISTRATIVE HEARING IS AVAILABLE FOR ALL ORDERS, NOTICES, AND REPORTS IN THIS SUPPLEMENTAL REPORT, WITH THE EXCEPTION OF ADVISORY NOTICES.

If you wish to contest the Department's action, you have the right to request an administrative hearing to be conducted in accordance with Sections 120.569 and 120.57, Florida Statutes and to be represented by counsel or other qualified representative. Your request for hearing must contain:

1. Your name, address, and telephone number, and facsimile number (if any).
2. The name, address, and telephone number, and facsimile number of your attorney or qualified representative (if any) upon whom service of pleadings and other papers shall be made.
3. A statement that you are requesting an administrative hearing and dispute the material facts alleged by the department, in which case you must identify the material facts that are in dispute (formal hearing), or that you request an administrative hearing and that you do not dispute the facts alleged by the department (informal hearing).
4. A statement of when (date) you received the Notice and the file number of this Notice.

Your request for a hearing must be received at the address shown on this Notice within twenty-one (21) days of receipt of this Notice. If you fail to obtain a Release from this Notice or fail to request an administrative hearing within the twenty-one (21) day



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deadline you waive your right to a hearing and the Department may enter a Final Order imposing up to the maximum penalties as authorized by Florida Law.

ACKNOWLEDGEMENT

I acknowledge receipt of a copy of this document.

(Signature of DACS Representative)

RICHARD BRASHER, SENIOR SANITATION AND SAFETY
SPECIALIST

(Signature of Person in charge)



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(Please Print Name and Title)

Disclaimer: This report is generated from the enterprise database and may not be the same as reports generated by the electronic inspection system utilized in the field.