## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000029694

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90111 029 \*\*\*150.00

	BAKER CORPORATION									
Principal Place	e of Business	Ma	illing Address				110010011001100101001001001001001001001			
P.O. BOX 1829 DOVER FL 33527-1829 P.O. BOX 1829 DOVER FL 33527-1829							DO NOT WRITE II	N THIS S	PACE	
							3. Date Incorporated or Qualifed			_
							04/02/1997			
2. Principal P	lace of Business	2a.	Mailing Address			_	4. FEI Number		Ap	plied For
21		26					59-3436320		No	t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Fee Re	
City & Stat	ė		City & State	_			6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		Added	Fees
Zip	Country		Zip	Cour	ntry		<ol><li>This corporation owes the current y</li></ol>			-7
24	25	29		30			Personal Property Tax.		X Yes	□No
	9. Name and Address of Cur	rent Regist	tered Agent		041		10. Name and Address of New Regi	stered A	gent	
ABIT	DIL ALAWED CHARTERED			ļ	81	Name				
AMERILAWYER CHARTERED				-	82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
	ALMERIA AVENUE RAL GABLES FL 33134									
COF	VAL GADLES FL 33134				83					
				Ì	84	City		FL	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered OFFICERS	agent and title it	f applicable. (NOTE			it signature required	when reinstating)  ADDITIONS/CHANGES TO OFFICE	ATE		
TITLE	PSTD		☐ DELETE	1.1 707	LE				☐ Change	☐ Addition
NAME	BAKER, BIONNIE K			1.2 NA						
STREET ADDRESS	FACE DOMESTIC OTOFIT				WE					
CITY-ST-ZIP	DOVER FL 33527			1.3 ST		ADDRESS				
	DOTENTE GOOD!			1.3 STI 1.4 CIT	REET					
TITLE	DOVERTILE GOOZE		☐ DELETE		REET			_	. Change	Addition
	DOVERTILE GOODEN		☐ DELETE	1.4 CIT	REET TY-ST				. Change	☐ Addition
TITLE			☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA	REET TY-ST TLE JME				Change	☐ Addition
TITLE NAME				1.4 CIT 2.1 TIT 2.2 NA	REET TY-ST TLE JME REET	T-ZIP			-	- ·
NAME STREET ADDRESS			☐ DELETE	1.4 C/T 2.1 T/T 2.2 NA 2.3 S/T	REET TY-ST TLE UME REET TY-ST	T-ZIP			Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				1.4 C/T 2.1 T/T 2.2 NA 2.3 S/T 2. 4 C/C	REET TY-ST TLE ME REET TY-ST	T-ZIP	and the same and the same and		-	- ·
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE				1.4 C/T 2.1 TIT 2.2 NA 2.3 STI 2. 4 C/I 3.1 TIT 3.2 NA	REET TY-ST TLE ME REET TY-ST	T-ZIP	and the same of th		-	- ·
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME			☐ DELETE	1.4 C/T 2.1 TIT 2.2 NA 2.3 STI 2. 4 C/I 3.1 TIT 3.2 NA	REET  TY-ST  TLE  ME  TREET  TLE  ME  TREET	F. ZIP  F ADDRESS  T ADDRESS			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS				1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST	REET TY-ST TLE ME REET TLE ME TREET TLE TREET	F. ZIP  F ADDRESS  T ADDRESS			-	- ·
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 34. CI	REET TY-ST TLE REET TTY-S TLE TTY-S TLE	F. ZIP  F ADDRESS  T ADDRESS			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA	REET TY-ST TLE MME REET TLE MME REET TLE TTY-S' TLE TAME	F. ZIP  F ADDRESS  T ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			☐ DELETE	14 CIT 2: 1 TIT 2: NA 2: 3 ST 2: 4 CI 3: 1 TIT 3: NA 3: 3 ST 34. CI 4: 1 TIT 4: 2 NA 4: 3 ST 4: 4 CI 1	REET TY-ST TLE ME REET TLE ME REET TTY-ST TLE AME TTY-ST TREET TY-ST	T-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS			☐ DELETE	14 CTT 2:1 TIT 2:2 NA 2:3 STT 2:4 CT 3:1 TIT 3:2 NA 3:3 ST 34. CT 4:1 TIT 4:2 NV 4:3 ST 4:4 CT 5:1 TIT	REET TY-ST FLE ME REET TIY-S' FLE ME TY-S' FLE REET TY-SI FLE FLE TY-SI FLE	T-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			☐ DELETE	14 CIT 2:1 TIT 22 NA 2:3 ST 2:4 CI 3:1 TIT 3:2 NA 3:3 ST 3:4 CI 4:1 TIT 4:2 NA 4:3 ST 4:4 CIT 5:1 TIT 5:2 NA	REET TY-ST TLE REET TTY-S' TLE ME REET TY-S' TLE AME TY-ST TLE TY-ST TLE AME	T-ZIP  T ADDRESS T-ZIP  T ADDRESS T-ZIP  T ADDRESS T-ZIP			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			☐ DELETE	14 CIT 2:1 TIT 22 NA 2:3 ST 2:4 CI 3:1 TIT 3:2 NA 3:3 ST 34. CI 4:1 TIT 4:2 NA 4:3 ST 4:4 CIT 5:1 TIT 5:2 NA 5:3 ST	REET TY-ST TLE ME REET TTY-ST TLE AME TREET TY-ST TLE TY-ST TLE AME TY-ST TLE	T. ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS I ADDRESS			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CONTY-ST-ZIP  CONTY-ST-ZIP			☐ DELETE	14 CIT 2:1 TIT 22 NA 2:3 ST 2:4 CI 3:1 TIT 3:2 NA 3:3 ST 3:4 CI 4:1 TIT 4:2 NA 4:3 ST 4:4 CIT 5:2 NA 5:3 ST 5:4 CIT 5:	REET TY-ST TLE ME TY-ST TLE ME TY-ST TLE AME TY-ST TLE ME TY-ST TLE ME TY-ST TLE TY-ST TY-ST TY-ST TY-ST	T. ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS I ADDRESS			☐ Change ☐ Change ☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE			☐ DELETE	14 CIT 2: 1 TIT 2: NA 2: 3 ST 2: 4 CI 3: 1 TIT 3: NA 3: 3 ST 34. CI 4: 1 TIT 4: 2 NA 4: 3 ST 4: 4 CIT 5: 2 NA 5: 3 ST 5: 4 CIT 6: 1 TIT 5: NA	REET TY-ST TLE MME REET TLE MME REET TY-S' TLE AME TREET TY-SI TLE	T. ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS I ADDRESS			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CONTY-ST-ZIP  CONTY-ST-ZIP			☐ DELETE	1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 34. CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.2 NA	REET TY-ST TLE ME REET TITY-ST TLE AME REET TY-ST TLE TY-ST	T. ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS IT-ZIP  I ADDRESS I ADDRESS			☐ Change ☐ Change ☐ Change	Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Bonnie K. Baker

02-23-99

813/707-9603