## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000029694 1. Entity Name 02 NOV 12 AM 10: 56 BONNIE BAKER CORPORATION SECRETARY OF STATE DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 3<u>117 Oaklyn Drive</u> Post Office Box 18123 Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State FEI Number Applied For <u>Tampa</u>, Florida <u>Tampa,</u> Florida 33%79-2123 59-3436320 Not Applicable Zip Country Country \$8.75 Additional 33609 5. Certificate of Status Desired 33679-8123 Name and Address of Current Registered Agent Mame DO NOT WRITE SPIEGEL & UTRERA, P.A P.O.,Box Number is Not Acceptable) 1840 Southwest 22 STreet Street Address IN THIS SPACE 4th Floor Miami 8. The above SPIEGELY Submitter American purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE BY Natalia Utrera, Vice President CHATE Published Agent signal to signal concurrence January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 .10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be Amended UBR is \$61.25 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE PSTD TITLE 400008932514 MAME Baker, Bonnie K., NAME CR2E034B (12/ 11/12/02--01037--017 \*\*150.00 STREET ADDRESS 3117 Oaklyn Drive STREET ADDRESS CHY-ST-ZIP Tampa, Florida 33609 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE MANE NAVE STREET ADDRESS STREET ADORESS DO NOT WRITE CITY-ST-7IP CITY-ST-ZIP THUE HILL IN THIS SPACE NAME STREET ADORESS STREET ADDRESS CITY-\$1-ZIP CITY-ST-ZIP DILE TITLE NAME MAMA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP THE TITLE NAM NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP

13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall in the dressing legal effect as if made under each 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 on an affairment with an address, with all other like empowered. SIGNATURE:

Bonnie K. Baker, President

Days

## AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA	1	)
		)
COUNTY OF HILLSBOROUGH		1

- 1. Bonnie K. Baker is the President of BONNIE BAKER CORPORATION, a Florida corporation, (hereinafter "Corporation").
- 2. That the Corporation was administratively dissolved by the Florida Department of State on October 4, 2002.
- 3. That the Corporation failed to file its 2002 Annual Report or pay the 2002 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
  - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
  - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
- 4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2002 Annual Report fees and the filing of its 2002 Annual Reports, which are presented simultaneously with this Affidavit.
- 5. BONNIE BAKER CORPORATION satisfies the requirements of the Florida Statutes 607.0401.
- 6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: <u>5</u> day of November, 2002

FURTHER, AFFIANT SAYETH NOT

BONNIE BAKER CORPORATION

y: Donnie K. President

SWORN AND SUBSCRIBED

before me this <u>5</u> day of November, 2002.

Melison O Moochy
Notary Public, State of Florida at Large
Printed Name: Melissa Mooch

Commission Expires: <u>69 | 28 | 2005</u>

"OFFICIAL SEAL"
Melissa J. Moody
Notary Public, State of Illinois
My Commission Exp. 09/28/2005

SPIEGEL & UTRERA, P.A. (Requestor's Name) 1840 CORAL WAY, 4TH FLOOR (Address) MIAMI, FL 33145 (305) 854-6000 OFFICE USE ONLY (City, State, Zip) (Phone #) CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS **Profit** Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION TALLAHASSEE, FLORIDA Annual Report SHALLAROYAGO TO HOISIVIC Foreign Fictitious Name BIATS 30 THEMISAGED Limited Partnership Name Reservation 05 NON 15 WH 3: 06 Reinstatement Trademark

Other

CR2E031(10/92)