

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

STATE OF FLORIDA)
)
COUNTY OF HILLSBOROUGH)

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: 5 day of November, 2002

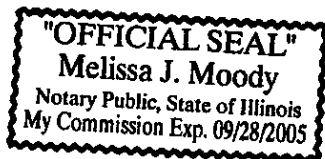
FURTHER, AFFIANT SAYETH NOT

BONNIE BAKER CORPORATION

By: Bonnie K. Baker, President
Bonnie K. Baker, President

SWORN AND SUBSCRIBED

before me this 5 day of November, 2002.



Melissa J. Moody
Notary Public, State of Florida at Large
Printed Name: Melissa Moody
Commission Expires: 09/28/2005

SPIEGEL & UTRERA, P.A.
 (Requestor's Name)
 1840 CORAL WAY, 4TH FLOOR
 (Address)
 MIAMI, FL 33145 (305) 854-6000
 (City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Bonnie Baker Corporation PA7000029694
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input checked="" type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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 02 NOV 12 AM 9:06
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA
 Examiner's Initials