

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000052819

**Entity Name:** BAGUETTE PRODUCTIONSINC.

**Current Principal Place of Business:**

893 NE 81ST STREET  
APT 1  
MIAMI, FL 33138

**FILED**  
**Apr 13, 2021**  
**Secretary of State**  
**5243821545CC**

**Current Mailing Address:**

893 NE 81ST STREET  
APT 1  
MIAMI, FL 33138 US

**FEI Number: 83-0901610**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FRETEL, SAMUEL  
893 NE 81ST STREET  
APT 1  
MIAMI, FL 33138 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name FRETEL, SAMUEL V  
Address 893 NE 81ST STREET  
APT 1  
City-State-Zip: MIAMI FL 33138

Title TRE  
Name FRETEL, SAMUEL V  
Address 893 NE 81ST STREET  
APT 1  
City-State-Zip: MIAMI FL 33138

Title SEC  
Name FRETEL, SAMUEL V  
Address 893 NE 81ST STREET  
APT 1  
City-State-Zip: MIAMI FL 33138

Title DIR  
Name FRETEL, SAMUEL V  
Address 893 NE 81ST STREET  
APT 1  
City-State-Zip: MIAMI FL 33138

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: SAMUEL V. FRETEL**

**PRÉSIDENT**

**04/13/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date