2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842478

Entity Name: BAXTER EXPORT CORPORATION

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
% TAX DEPT.,ONE BAXTER PKWY P.O. BOX 703 DEERFIELD, IL 600150703				ONE BAXTER PKWY P.O. BOX 703 DEERFIELD, IL 60015			
Current Mailing Address:				New Mailing Address:			
% TAX DEPT.,ONE BAXTER PKWY P.O. BOX 703 DEERFIELD, IL 600150703			,ONE BAXTER PKWY P.O. BOX 703 DEERFIELD, IL 60015				
FEI Number:	36-2605679	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certifica	te of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							istered Agent:
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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			
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (X) I DEL SALTO, CAP 2415 SEA ISLAN FORT LAUDERD	D DR		Title: Name: Address: City-St-Zip:	()	Change	() Addition
Title: Name: Address: City-St-Zip:	ASD () E PERSKY, MARLA ONE BAXTER PK DEERFIELD, IL	(WY		Title: Name: Address: City-St-Zip:	VPD (X) LICHTENSTEIN, ONE BAXTER P DEERFIELD, IL	SUSAN KWY	() Addition
Title: Name: Address: City-St-Zip:	AT () ETHURMAN, CHAPONE BAXTER PROBERFIELD, IL	(WY		Title: Name: Address: City-St-Zip:	()	Change	() Addition
Title: Name: Address: City-St-Zip:	AT () [LYKKE, NMATTH ONE BAXTER PK DEERFIELD, IL	EW WY		Title: Name: Address: City-St-Zip:	AT (X) LYKKEN, MATTI ONE BAXTER P DEERFIELD, IL	HEW A KWY	() Addition
Title: Name: Address: City-St-Zip:	D () E GREISCH, JOHN ONE BAXTER PK DEERFIELD, IL	(WY		Title: Name: Address: City-St-Zip:	()	Change) Addition
Title: Name: Address: City-St-Zip:	T () EDAVIS, ROBERT ONE BAXTER PROBEERFIELD, IL	(WY		Title: Name: Address: City-St-Zip:	()	Change	() Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MATTHEW A. LYKKEN AT 04/20/2006